

# CHEMIST & DRUGGIST

THE NEWSWEEKLY FOR PHARMACY

PHARMACY update  
MULTIPLE CHOICE QUESTIONS

12 April 1997

## Toestimonials

"I was astounded when, after only three applications, my feet were well and truly healed (and have been since). Your product certainly lives up to its claims".  
Mrs Y.S. Newtownards

Since my husband used your cream, no more scratching. It's fantastic and it really works.  
Mrs M.P. Odhani

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Mr. TK. Kings Langley

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Mrs B.R. Shaftesbury



benzoic acid, salicylic acid

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Clinical results confirm that nearly three quarters of patients applying Toepedo Cream experience relief from itching in just 10 minutes.

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## Staffs offers 24-hour on-call pharmacy

## Fitness to Practise Bill kicks off in the autumn

## Medicinal cannabis ad campaign under way

## Young VIPs wooed by the sanpro companies



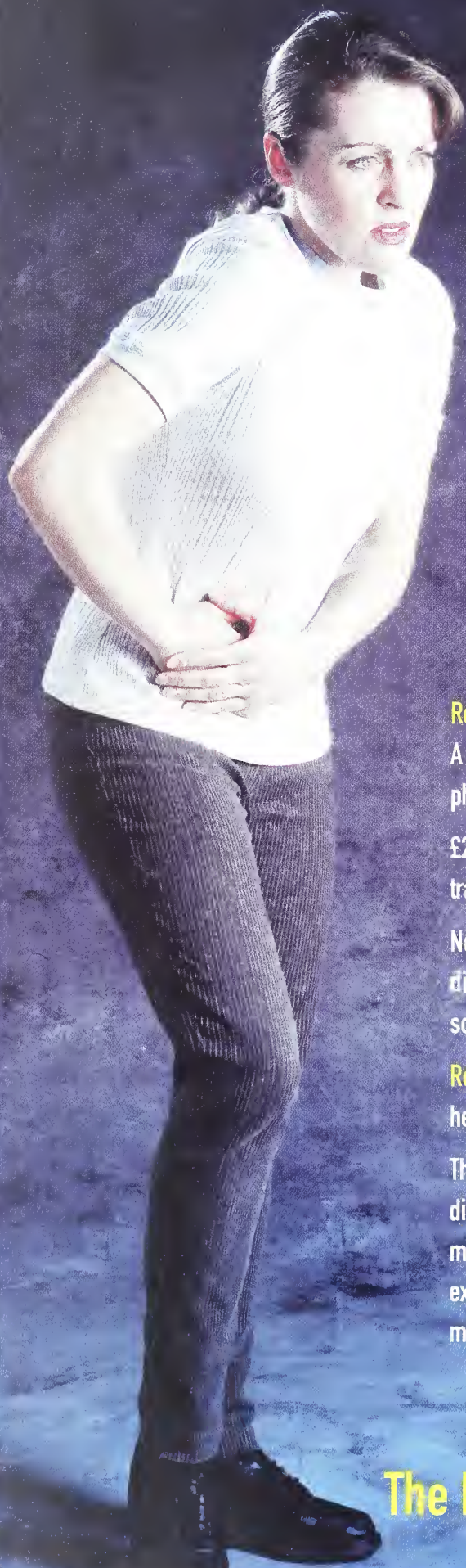
## Crookes' Usher goes for KISS approach

## Pharmacy applicants 'dictating salaries'

## NPA seeks Government aid over 48-hour week

Online at <http://www.dotpharmacy.com/>





# 1.6 million reasons to recommend Relaxyl.\*

alverine citrate.

**Relaxyl** created the OTC category for Irritable Bowel Syndrome (IBS).

A market now worth £1.6 million<sup>1</sup>, and growing fast. That's £1.6 million of new pharmacy only sales.

£2 million consumer advertising to date, POS, and ongoing Pharmacy Assistant training has built a brand that you and your IBS customers can rely on.

No anti-spasmodic is proven to be more effective at easing the pain and discomfort of IBS than **Relaxyl**. It works directly at the site of pain and, unlike some remedies, isn't restricted to meal times.

**Relaxyl's** active ingredient Alverine Citrate also has a proven prescription heritage, allowing you to recommend with confidence.

There are an estimated 2.5 million diagnosed IBS sufferers, and many more undiagnosed. So as the market expands further, there'll be many more reasons to recommend **Relaxyl**.



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Presentation: Buff/green hard gelatin capsules for oral administration. Each capsule contains 60mg alverine citrate. Uses: Relaxyl is indicated for the relief of smooth muscle spasm of the gastro-intestinal tract in irritable bowel syndrome. Dosage: Adults, the elderly and children 12 years and over: 1 or 2 capsules, one to three times daily. Not recommended for children under 12 years of age. Contraindications: Cases of paralytic ileus or hypersensitivity to any of the ingredients. Interactions: None. Special Warnings: if symptoms persist or worsen, consult your doctor. Side effects: Possible side effects may include nausea, headache, dizziness, itching, rash and allergic reaction. Effect on ability to drive and operate machinery: None. Incompatibilities: None. Use during pregnancy and lactation: No teratogenic effects have been reported, but caution should be exercised during the first trimester of pregnancy. Overdosage: Hypotension and atropine like toxic effects. Pharmaceutical precautions: Store in a cool dry place below 25°C. Legal category: Pharmacy. Package quantities and price: 18 capsules, £4.59. Product Licence No: PL0322/0072. Date of preparation March 1997. Shelf life: 3 years. Product Licence Holder: Norgine Ltd., Moorhall Road, Harefield, Middlesex UB9 6NS. Distributor: Whitehall Laboratories, Huntercombe Lane South, Taplow, Maidenhead, Berkshire SL6 0PH. \*Trade Mark Reference: 1. IMS data

WHITEHALL



It is rare to find a senior pharmacist from Boots the Chemists putting pen to paper on leading topics such as 'where does Boots see community pharmacy in the future?' An article by Colin Baldwin, Boots' pharmacy development controller, in the latest IPMI newsletter, will be read with interest, given the influence – welcome or otherwise – that Boots has on shaping community pharmacy practice. Mr Baldwin spells out Boots' "total commitment" to community pharmacy, emphasising that it is a highly efficient system for supplying medicines. "It is inconceivable that an alternative distribution network could be created," he says. "The NHS has a facility worth billions of pounds funded by the private sector."

Boots sees the supply of prescription and OTC medicines, and health maintenance products, along with healthcare advice, remaining as its core activity. Mr Baldwin is more cautious about new roles and is adamant about the need for new money to support new services. Community pharmacy diverts considerable costs from the NHS by encouraging responsible self-medication, he argues, and is unable to absorb any more assaults on the profitability of NHS business without threat to its overall viability. In a nutshell, the company is "cautious but confident" about the future. It would seem Boots is in tune with the 'New Age' agenda. But then the increase to its branch network by an additional 200-plus outlets is nearly complete, filling any gaps in its national coverage.

Intriguingly, Boots sees information technology as key to the integration of pharmacists into the healthcare team, rather than co-location in health centres or clinics. Given the company's activities to corner repeat script business, its lukewarm response to the PRS Health Plus initiative, and the development of its nationwide PMR system, Boots' moves in the IT field could be worth watching.

## CHEMIST & DRUGGIST

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Chemist & Druggist is published weekly, Friday  
Chemist & Pharmacy Magazine

Full Irished Saturday, 28  
Miller Freeman plc, Sovereign Way,  
Tonbridge, Kent TN9 1WV

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Internet site

http://www.dotpharmacy.co.uk

Subscriptions Home £115 per annum  
Overseas & Eire £165 per annum  
including postage

£2.40 per copy, postage extra

Circulation and subscription: Royal  
Sovereign House, Beresford Street,  
London SE18 6BQ. Tel: 0181 855 1077

Refunds on cancelled subscriptions are  
only provided at the publisher's  
discretion unless specifically  
guaranteed until the termination of  
subscription after

The editor's photos used are the work of  
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**un** Miller Freeman  
A United News & Media publication



**ABC**  
BUSINESS PRESS

# CHEMIST & DRUGGIST

THE NEWSWEEKLY FOR PHARMACY

VOLUME 247 No 6081 137th YEAR OF PUBLICATION ISSN 0009-3033

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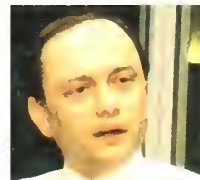
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## Phenergan recalled

A batch of Phenergan Elixir was recalled last Friday after it was found that the patient information leaflet, carton and label all contained incorrect dosage instructions.

The error occurred on 100ml bottles with batch number 7B357 and expiry date February, 1999. The batch was first distributed on February 28. Seventy thousand bottles were affected. Of these, about 40,000 have been accounted for at wholesalers, says a Rhone-Poulenc Rorer spokesman. The batch had been distributed to wholesalers across the UK and Guernsey.

Pharmacists should return affected bottles to their wholesaler for credit. The RPR spokesman anticipates that a new batch of Phenergan with revised labelling will be available in the next two to three weeks. RPR can be contacted on 0990 133347.

# Staffordshire pharmacists in 24-hour on-call scheme

Six pharmacies in North Staffordshire are starting an on-call scheme this week for out of hours dispensing.

The pharmacists will receive £120 a week for being on call between 8.00pm-8.00am, plus urgent fees for prescriptions dispensed. They will also be paid for stocking a selection of drugs, such as antibiotics, injectable analgesics and anti-emetics used in palliative care, some of which are needed infrequently. This list of drugs has been sent to GPs, together with telephone numbers of the pharmacists on duty.

The health authority is provid-

ing the pharmacists with mobile telephones, whose numbers will not be available to the general public.

The pilot is one of several being financed by the health authority in collaboration with the local pharmaceutical committee. Other projects include domiciliary supply of medicines to the elderly housebound, smoking cessation, pharmacist-GP referral and formulary development.

North Staffordshire's pharmaceutical adviser, Jeff Bourne, told *C&D* that local pharmacists were invited to volunteer for the various projects and were

selected to give a good spread of different pharmacy types.

The 12-month out of hours pilot will be evaluated by seeking the views of pharmacists, doctors and patients. Pharmacists will be asked about security aspects and how much it disrupted their lifestyle.

LPC secretary and project leader Gaz Clapinski said the pharmacists involved would need to be flexible, so if someone was called out three times in one night, another would take over the following night to let him get some sleep, although the aim would be to do one week in six.

## Boots view for the New Age

Pharmacists should concentrate on using information technology more to fit into the healthcare team, says Boots' pharmacy development controller, Colin Baldwin.

"The key to achieving closer involvement and integration with other professionals is through IT, not through the co-location of pharmacists within health centres or clinics," he says, writing about the New Age in Pharmacy from a multiple viewpoint in the Institute of Pharmacy International's spring newsletter.

Mr Baldwin supports his view by saying: "Pharmacists have an important role to play in such locations, but if patients are to receive the full benefit of community pharmacists' expertise as medicine managers, they must have access to such expertise over the long hours that a com-

munity pharmacy is open and where it is convenient for them."

While recommending that community pharmacy should participate in new activities and pilot schemes, he says that the pharmacist's contribution to outcomes should be properly assessed and valued, and appropriate payment secured.

"Clearly, pharmacy cannot adopt the position of 'we won't do it at all unless we are paid'. Instead, there needs to be a willingness to be involved on the understanding that if value is demonstrated, pharmacy will be appropriately remunerated," he says.

He points out that the viability of community pharmacy will be threatened if there are further threats to the profitability of NHS business. Boots has less dependence on NHS business, he

says, so is less vulnerable. But the company has a responsibility to add value to its business for shareholders. "It cannot, therefore, support persistent dilution of the profitability of any part of the business."

For this reason Mr Baldwin says: "New roles which support and enhance NHS business must be financed by new monies which properly reflect the costs associated with such services."

Care will have to be taken to ensure that the widest possible distribution of comprehensive pharmaceutical services is maintained. Although individual pharmacists or pharmacies may provide specialist services in the community, "this must not be at the expense of the provision of comprehensive services in all community pharmacies as the public have a right to expect".

## Tesco tackles diabetes

Tesco is launching a diabetes information pack in its 170 in-store pharmacies. As well as supporting National Diabetes Week in June, the company plans to offer diabetes testing in the autumn.

The pack has been produced in conjunction with Lilly Diabetes Care, Becton Dickinson and Boehringer Mannheim. It gives advice on disease management, including tips on diet, exercise, blood-sugar monitoring, symptoms to look for and self-help.

From October, customers will be given a free urine stick to do a home test. If the test indicates they may have the disease, customers will be recommended to seek medical advice.

Diabetes is estimated to affect more than three million people in the UK, of which only half the cases have been diagnosed.

## Signature collection by dispensing doctors put back

The NHS Executive has postponed, until September, plans to make dispensing doctors obtain patient signatures on FP10s, *GP* magazine said last week.

The General Medical Services Committee has tried, so far without any success, to obtain funding to allow doctors to put systems in place for collecting patient signatures.

The Dispensing Doctors' Asso-

ciation has threatened to boycott the scheme because the practice of collecting prescriptions from different places made it impossible to police patients' exemption form charges.

*GP* also reported that the Department of Health has dropped plans which would have left GPs in breach of their Terms of Service for not correctly writing patient pack prescriptions.

## Look out for this month's Pharmacy Update question paper

Enclosed in this week's issue is the questionnaire for Pharmacy Update modules carried during March:

- Protease inhibitors (45)
- Constipation (46)
- Tuberculosis (47).

Pharmacy Update is a distance learning programme and is accredited by the College of Pharmacy Practice. Previous modules can be obtained by using the faxback service on 0891 44791 (premium rates apply). Internet users can catch up by accessing the dotpharmacy site (<http://www.dotpharmacy.com>) which has a library of previous modules and questionnaires. A telephone marking service is available for a fee of £12.50 plus VAT. A certificate is issued to verify the number of hours of continuing education achieved.



## Blenkinsopp and Carr to stand down

Royal Pharmaceutical Society Council members Alison Blenkinsopp and John Carr are not seeking re-election to Council in May.

The other five Council members who will be standing again are Gordon Appelbe, Hassan Argomandkhah, Peter Curphey, Linda Stone and Nicholas Wood.

There are another seven candidates standing: John Balmford, Michael Burden, David Kent, Mark Koziol, Hopkin Maddock, Albert Smith, Melvyn Smith, Marie Stainton and Joanne West.

There will be no election for honorary auditors in 1997, the next election in that category being in 1999.



## Pharmacists more effective with smoking advice than doctors

Initial impressions from a smoking cessation pilot in Tyne & Wear suggest that pharmacists may be more effective than doctors in helping people to stop smoking.

This might be because pharmacists can offer products and advice immediately – although this has yet to be proven, says Gateshead and South Tyneside Health Authority's pharmaceutical adviser, Wendy Broderick.

The authority has provided 14 pharmacists with Pharmacists' Action on Smoking packs, paid their expenses for attending a training course and is paying a fee for each customer recruited into the scheme. Clients wishing to give up smoking receive free advice and support for up to a year.

The pilot is part of a no smoking strategy involving all primary care practitioners and aims to discover which interventions are the most effective. The first group of pharmacists started giving advice on New Year's Day, the rest on No Smoking Day. One of them, David Carter, said there had been considerable interest and a lot of clients had been recruited.

## JBPA's new name

The Joint Boots Pharmacists' Association has voted to change its title. In the future, it will be known as the Boots Pharmacists' Association.

The new title was agreed at its annual general meeting held in Manchester on March 16. All communications should be directed through the general secretary, George Smallwood, 7 Dornon Road, South Croydon, Surrey CR2 7DR.

# Fitness to Practise regulations

This autumn, the Royal Pharmaceutical Society should be able to stop pharmacists from practising immediately if they are considered too ill.

The Society is now drafting regulations to implement the Pharmacists (Fitness to Practise) Act 1997, which recently received Royal Assent. The Act establishes a new Health Committee with power to restrict or suspend from registration those pharmacists whose ability to practise is seriously impaired because of physical or mental ill health.

The Committee will have a chairman and deputy chairman, who are registered medical practitioners appointed by the Privy Council. There will be six other members appointed by the Society's Council, at least three of whom are registered pharmacists. Legal assessors will also be

appointed to advise on legal aspects.

The Act provides for an appeal tribunals panel to be set up consisting of two registered medical practitioners, two registered pharmacists, plus a chairman and deputy chairman. Any Society employees, officers or members of Council or the Statutory Committee will not be eligible.

The Council will decide if a case should be referred to the Health Committee and will notify the pharmacist, giving them 28 days to reply, or less if Council thinks the public should be protected without delay. The Committee will be able to make a 'conditions of practice order', or a 'suspension order' which will run for a specified period of no more than three years and may be reviewed at any time.

Regulations will also entitle

the pharmacist to be legally represented at the hearing and for the hearing to be held in private, unless the Committee considers it should be public. The appeal tribunal will have the power to confirm, revoke or change the orders and may award costs or expenses.

Sue Sharpe, the Society's director of legal services, told C&D that the regulations were unlikely to come into effect before October. The type of restrictions imposed might require the pharmacist to work with another pharmacist or for a limited number of hours or only in certain environments. "The regulations would be designed to give the Committee maximum flexibility in allowing the person gradually back into full practice, while still protecting the public," she said.

## Stockport seamless care pilot scheme gets permanent funding

A pilot scheme in Stockport to improve compliance among patients after they are discharged from hospital has proved so successful that it has been funded on a permanent basis.

Pharmacist Jane Sheldon, who works at Stepping Hill Hospital, introduced the use of compliance aids as part of her work for a masters degree, and it successfully helped 85 patients.

"Many patients leave hospital with a complex drug regime, and for elderly people living on their own this can be difficult. In the past, they would be discharged with a week's supply of medicines and their GP would be sent a letter detailing future prescrip-

tions," comments Ms Sheldon.

The pilot introduced a mechanism which enabled the hospital to liaise closely with community pharmacists and GPs to ensure they were better prepared to meet patient needs. Under the scheme, patients are assessed to see whether they need extra care. If they do, a pharmacist checks that the patient's local pharmacy can handle future prescriptions, and sends it a care plan, which can include aids such as compliance trays. At the same time, the patient's GP receives a discharge plan.

So far, 155 patients have used the system and 33 pharmacies have been involved.

## Labour and Lib Dems health promises

Labour set out its health priorities in its election manifesto last week, promising to put £100 million into cutting waiting lists and vowing to end the NHS internal market.

It promises that "primary care will play a lead role" in the development of the health service and also proposes that a new minister for public health "will attack the root causes of ill health". The manifesto makes no reference to the pharmacy sector or prescription charges.

The Liberal Democrats party is promising an extra £540m every year, which would go towards freezing prescription charges, recruiting extra doctors and restoring free eye dental checks.



# Medicinal cannabis ad campaign

The Alliance for Cannabis Therapeutics campaign to allow cannabis to be prescribed for medicinal purposes will see its first adverts appearing this week.

The London magazine *Time Out* will be the first to carry two of six adverts. These include slogans such as 'I can't prescribe you a safe naturally-occurring herb for the pain of MS. But I can give you heroin' printed by a picture of a cannabis leaf in a mortar; and 'To escape the pain of chronic arthritis, Mrs Taylor is breaking the law' accompanying a picture of a cannabis leaf being used to make tea.

Sharon Gallagher of the ad agency McCann Erickson, which is managing the campaign, says the company learnt about ACT

and thought it was a great cause. However, she adds: "We do our best to keep away from the general legalisation debate." She says that the national newspapers have shown interest in the campaign, but advertising costs may prevent the adverts appearing in them.

ACT was set up four years ago by sufferers of multiple sclerosis who found cannabis was one of the few substances to give symptomatic relief. It is also used to alleviate symptoms of pain and nausea in patients with cancer, AIDS and arthritis.

The Royal Pharmaceutical Society, with support from the British Medical Association, is holding a symposium with the MS Society on April 23 looking at

the therapeutic applications of cannabinoids. It aims to survey the evidence for the medicinal use of cannabinoids, as well as clarifying the legal position.

A survey published in this week's *BMA News Review* says that 62 per cent of GPs in a panel of over 100 believe that cannabis should be available on a strictly controlled prescription basis for proven therapeutic reasons. Just over one-fifth opposed this view. Support among hospital doctors was slightly higher.

However, over half the GPs disagreed that cannabis should be decriminalised (38 per cent in favour). Support for decriminalisation of other 'recreational' drugs dropped to 6 per cent, with 87 per cent disapproving.

## More details on NPA diploma

The National Pharmaceutical Association has issued more details of the postgraduate diploma in community pharmaceutical healthcare, due to start at the University of Brighton in 1998 (*C&D* March 29, p6).

The distance learning course, which lasts 18 months, includes three residential weekends and has a modular format. It will cost about \$1,800, including residential weekends, and involves about three and a half hours' study each week. The diploma will be based on continuous assessment.

Subjects covered will include aspects of clinical pharmacy, concepts of pharmaceutical care, evidence-based practice, and the pharmacist's role in the primary healthcare team, health promotion and education. By combining clinical knowledge and practice, the diploma aims to help pharmacists meet New Age challenges and fulfil additional roles.

The course will be advertised early next year and 30 students will be accepted for the first cohort, then between 50-100 for each cohort after that, with priority given to NPA members and their employees. Pharmacists wishing to continue their studies to MSc level can add a research element to the diploma.

Initial start-up costs are being met by the NPA and the university but opportunities for additional sponsorship will be explored.

Dr Roy Daisley, deputy head of department at Brighton's School of Pharmacy, says: "Our collaboration with the NPA in this project is a partnership in education from which community pharmacists will benefit."

## BPSA call for practical pre-reg exam

Education was the hot topic for discussion at the British Pharmaceutical Students' Association's 55th conference held in Bath this week.

Pre-registration pharmacists would prefer a practical clinical test to the current MCQ exam, according to delegates attending this year's conference.

This test would take some form of objective structured clinical examination (OSCE), as favoured by the hospital pharmacy training programmes.

Caroline Mathur (ex-Bradford) said this was to be preferred to multiple choice questions, which was just regurgitating information. She dismissed fears that OSCE would reduce the pass rate.

Nicole Wake (ex-Nottingham) agreed. "Medics have similar exams and their pass rates are about 30 per cent. Our profession is about practice, not answering questions in an MCQ exam."

Tara Cale-Morgan (ex-Leicester) wanted a combined exam, with MCQs to test law and ethics components. Bill Rial (ex-Aston) did not want more money wasted on restructuring the prereg exam, since, he said, OSCE already existed under another name. "We need to look at the quality of prereg tutors instead," he said.

The BPSA is holding a conference for pre-registration students. 'The Diverse Opportunities of Pharmacy' conference will take place at the Quality Friendly Hotel, Walsall, on April 19-20. The conference fee of \$48 includes overnight accommodation. Cheques, made payable to BPSA, should be sent to Tara Cale-Morgan, BPSA graduate officer, 2 Archangel Square, Camp Hill, Northampton NN4 9RA. For further information, contact Ms Cale-Morgan on 01604 768608 or 0976 656935.



The top table at the BPSA conference being held this week in Bath: Karen Wilson (ex-Nottingham), treasurer; the president, Phil Wragg (also ex-Nottingham); and Robert Forde (ex-Aston), secretary

## PSNI COUNCIL

The Pharmaceutical Society of Northern Ireland is to launch its '2020 Vision' for the development of the profession at PSNI's offices on April 23. It will be presented to all pharmacists in the province at a series of local events. Both the Ulster Chemists' Association and the Pharmaceutical Contractors Committee have given their support to the strategy after it was presented to them this month.

At its meeting last month, the Society's Council agreed unanimously to recommend accreditation of the four-year pharmacy degree course at Queen's University for five years, subject to a review after three. Concern was expressed about the future viability of the School because of its small size and the continuing downward pressure on finance.

The review is intended as a safeguard for the School, so that, if it is felt that undue financial or other pressures are being applied, remedial action can be taken by the professional bodies. The Society is to write to the Health and Education Ministries objecting to the financial cuts which are being imposed on Northern Ireland universities. Research budgets will be cut by \$4 million from this month.

● The primary health services manager of the South & East Belfast Trust has drawn the Society's attention to the fact that community nurses are using dosage units to improve compliance among patients who require help taking their medicines. The secretary, Derek Lawson, was instructed to reply positively, drawing attention to the problems of funding and liability.

● Vincent Harkin's application for restoration of his name to the register was approved. Andrew McKee's application for registration under the reciprocal agreement with the RPSGB was approved.

● The following applications for students were approved: **Suzanne Adams**, Mountnugent, Co Cavan; **Aaron Coulter**, 2 Elmtree Mews, The Village, Portadown; **David Kean**, 95a Middle Road, Saintfield, Ballynahinch; **Lisa Po Lin Khoo**, 13 Dunluce Avenue, Belfast; **Helen Lewsley**, 13 Tullybrannigan Road, Newcastle; **Cathy McFarlane**, 103 Craigleith Drive, Dundonald; **Emmet McHugh**, Newtown Monasterboice, Drogheda; **Martin McKenna**, 111 Five Mile Straight, Maghera; **Kathleen Mitchell**, 57 Drumsak Road, Aghadowey, Coleraine; **Wai Lun Mo**, 37 Erinvale Drive, Finaghy, Belfast; **Catherine Mullan**, 104 Castle Park, Limvady; **Canice Nicholas**, 61 Landahussy Road, Plumbridge, Omagh; **Gearoid Smyth**, Main Street, Swinford.



PHARMACIST PEN PORTRAIT

Michael Guerin



# Topical Reflections

● **Qualified** Michael wanted to leave Northern Ireland to see a bit more of the world and ended up going to Brighton. He graduated in 1987. He undertook a split pre-registration year, spending six months in Brownlow Health Centre and six in Beagon's Chemist, Belfast.

● **Career** Managed Herons Pharmacy in Belfast for eight months before buying his first outlet in Belfast. Three years later, he bought a second. He now operates four pharmacies in the Belfast area, one in the centre and three in the west of the city.

● **Projects** He has participated in a domiciliary visiting study with the Queen's University of Belfast. He is also developing information technology applications for community pharmacy on behalf of the Pharmaceutical Contractors' Committee. This involves investigating electronic data transfer systems, pharmacy hardware and software requirements, and both the positive and negative implications of IT to pharmacy.

● **Committees** Michael is a member of the Eastern Health Boards Area Pharmaceutical Committee and has been a member of the Pharmacy Practices Committee for three and a half years.

● **Interests** He is a keen golfer. He belongs to Belvoir Park, his local golf club, and is working to bring his handicap down.

● **Outlook on life** "The greatest gift in life is the ability to think great thoughts and to have the strength and determination to take action so that those thoughts become reality."

● **Pharmacy philosophy** He believes that community pharmacists are the most undervalued members of the primary care healthcare team. Michael thinks that pharmacy's future lies in developing patient-focused, quality pharmaceutical care, but with central Government's appropriate financial recognition. "Our destiny lies in our own hands, it is up to us to embrace this challenge and ensure a secure future for our profession."

## It just isn't that simple ...

Pharmacy has always been a profession of conflicting interests, but sometimes, however well intentioned the advice, honesty is not necessarily the policy that is in the best interests of the client.

This point has recently and expensively been made in a propaganda video, entitled 'Sense & Profitably', produced by Crookes Healthcare and sent to all community pharmacies. Its simple message is 'brand is best'. More profit for the pharmacist and better reassurance for the customer.

But in my pharmacy, and I know I am not unique, such a simplistic approach is not necessarily always the answer. I am driven by the twin requirements of serving my customers to the best of my professional ability, while ensuring my own long-term economic survival.

I accept that I do owe a debt to the pharmaceutical industry for the huge support it puts into developing branded medicines, but when I sell these I have to ensure that future sales occur in my shop and not in the 'not too dissimilarly merchandised' multiple just up the road!

My strength still lies in the quality of my advice and the slow process of building goodwill. Branded medicines have their particular place on my shelves and I will actively promote their very real

benefits. Yet, often, my advice and the cheaper 'own-brand' alternative, although producing less profit per sale, will produce the customer loyalty I need to ensure that I am the one who enjoys the fruit of every sale.

## Some sense on patient packs at last

Consultation seems to be the novel innovation for 1997. Having been ignored as an irrelevance for many years, I have now been asked twice in as many weeks to provide my 'sharp end' opinion, this time by the Medicines Control Agency on its proposals for allowing flexibility in the supply of patient packs (C&D April 5, p5).

In general, the proposal to allow a pharmacist to interpret quantities to the nearest patient pack makes sense and should have been introduced years ago. But however sensible this facility is, it still does not tackle the fundamental problem of uniformity.

It is all very well being allowed to dispense the whole pack, but patients will remain understandably confused when they are dispensed some drugs in 30-day packs while others are in 28s.

Eventually, they will come to understand that they have to throw away the remaining tablets to equalise dispensed quantities down to the lowest common denominator – what a waste, and a problem so easily rectified!

The industry should immediately prevent this farcical scenario by assuming the uniformity of the 28-day

patient pack, preferably subdivided into seven-day strips. This, with the implementation of the MCA's proposals, would then ensure an immediate adherence to a universal 28-day repeat prescription system, while allowing sufficient flexibility in the prescribing of small quantities. The use of the fracture sign, #, would then quickly become as redundant as the present NP notation.

## Efalex rationale a little clearer

Last week's **Pharmacy Update** provided an overview of dyslexia, which not only described this under-recognised problem but at last provided me with the rationale behind the introduction of Efalex in its treatment.

However, once again I am being asked to stock and recommend a supplement for the treatment of a disabling medical condition when the only evidence I have for its efficacy is hearsay, and research work which has neither established cause and effect nor involved properly controlled clinical trials.

Meanwhile, the only information concerned parents have is derived from third-party reporting in the pages of the popular press and the incomplete information I am able to provide them. However, at least I am now able to provide a rationale for the use of Efalex and then leave the decision to the judgment of the customer, but a properly licensed product would once again be my personal preference.



## Aricept launched for Alzheimer's



Aricept (donepezil hydrochloride) is the first licensed symptomatic treatment for mild to moderate dementia in Alzheimer's disease to be launched in the UK.

Manufacturers Eisai and Pfizer are stressing that the drug is not a cure for dementia, but may be effective in slowing the progression or temporarily improving symptoms in mild to moderate forms. It is not indicated for severe dementia.

Aricept is a piperidine-based specific and reversible inhibitor of acetylcholinesterase, the principle cholinesterase in the brain.

It is thought to act by augmenting cholinergic function in the central nervous system.

It is available as 5mg or 10mg tablets. Patients should be started on 5mg once daily, taken before going to bed. This should be followed for at least one month to allow assessment of early clinical responses to treatment. The drug has a half life of 70 hours, so steady state concentrations of the drug are reached after about three weeks.

If necessary, the dose can be upped after two months to the maximum recommended once-daily dose of 10mg. If discontinued, symptoms will gradually return to the expected pre-drug therapy levels, but no rebound effect has been noted after abrupt withdrawal.

Food has not been demonstrated to affect absorption. The dosage regimen can be followed by patients with renal or mild to moderate hepatic impairment, but Aricept is contra-indicated in those with known hypersensitivity

to donepezil hydrochloride, any excipients and piperidine derivatives.

Cholinesterase inhibitors may have vagotonic effects on the heart, including causing bradycardia, which may be important in patients with 'sick sinus syndrome' or other supraventricular cardiac conduction conditions.

Increased availability of acetylcholine will stimulate gastric acid secretion, which may put patients at increased risk of developing ulcers. Patients taking NSAIDs concurrently should be monitored for this. However, studies have not shown any greater incidence in peptic ulcer disease or GI bleeding with Aricept compared to placebo.

Similarly, although not observed in clinical trials, the drug has the potential to cause bladder outflow obstruction. Aricept should also be prescribed with care in patients with a history of asthma or obstructive pulmonary disease.

Although highly bound to

plasma proteins, it has not been seen to have an effect on other plasma protein-bound drugs. Metabolism of the drug does not appear to be saturable. Metabolism of theophylline, warfarin, cimetidine or digoxin is not inhibited. However, donepezil has the potential to interfere with anticholinergics and may work synergistically with neuromuscular blockers or cholinergic agonists.

No adverse effects relating to drug interactions with concomitant administration of SSRIs, neuroleptics or anti-Parkinsonian treatment has been reported.

Side-effects are considered mild and transient, with a possible increase in muscle cramps and diarrhoea in early treatment. Less common side-effects include fatigue, nausea, vomiting, insomnia and dizziness.

Aricept has a basic NHS price for 28-tablet packs of £68.32 for 5mg and £95.76 for 10mg.

**Eisai Europe Ltd. Tel: 0181 741 4879.**

## Zomig: dual action option

Zomig, a new 5-HT antagonist from Zeneca Pharma, is an effective, rapid-acting oral treatment for migraine, with or without aura.

Zomitriptan, although structurally similar to sumatriptan (Imigran), is said to have a greater oral bioavailability – 75 per cent of the maximum absorption occurs within the first hour – increased potency and increased lipophilicity. This last property, which enables it to cross the blood-brain barrier more effectively, means that it can act centrally to inhibit the transmission of pain impulses, as well as peripherally to reverse the cranial vasodilatation which occurs in migraine.

The recommended dose to treat a migraine attack is one 2.5mg tablet. Zomig has been shown to be effective when taken at any time during the migraine attack and gives significant early onset of pain relief in responding patients within one hour. Studies have reported 60-80 per cent of patients being pain-free within two hours. In addition to relieving the headache, it also

tackles the non-headache symptoms of migraine, such as nausea, vomiting, photophobia and phonophobia.

Should migraine symptoms persist or return within 24 hours of the first dose, a second dose can be effective and well tolerated, although it should not be taken within two hours of the initial dose. Zomig is well tolerated, but adverse effects reported include nausea, dizziness, sleepiness, asthenia and dry mouth.

Zomig is effective across a wide range of subtypes of migraine, including menstrual migraine and migraine on waking, which can be more difficult to treat than other forms.

Comparisons of Zomig with sumatriptan have found no substantial differences in side-effects or efficacy. However, Zeneca claims that a good response was seen to Zomig in many patients who had failed to respond to sumatriptan.

The basic NHS costs for a three-tablet pack is \$12 and a six-tablet pack with wallet is \$24.

**Zeneca Pharma. Tel: 01625 712712.**

## Lipobay to lower cholesterol

Lipobay, a low-dose, once-daily treatment for raised cholesterol, is being launched in the UK by Bayer.

The active ingredient, cerivastatin, is a synthetic statin which is indicated for the treatment of primary hypercholesterolaemia (Types IIa and IIb) in patients who have not responded adequately to diet alone.

The recommended dose is one tablet daily in the evening (at dinner or at bedtime), as the natural process of cholesterol synthesis in the liver is most active at night. The initial dose is 100mcg once daily, which can be increased, at intervals of at least four weeks, by increments of 100mcg depending on the response. The maximum recommended dose is 300mcg once daily.

Lipobay produces a response within two weeks of treatment with the maximum therapeutic response occurring within four weeks. Patients with high blood cholesterol should, of course, continue with a low-fat diet and pursue other lifestyle modifying factors, such as giving up smoking and increasing exercise.



Clinical trials have shown that, in doses of 100mcg up to 300mcg, cerivastatin can reduce levels of the most harmful lipid – LDL-cholesterol – by up to 31 per cent. At recommended doses, Lipobay also reduces serum triglycerides, which are an independent risk factor for heart disease, by 10-17 per cent. Levels of HDL-cholesterol, which help protect against heart disease, are increased by 5-9 per cent by treatment with Lipobay.

The most significant adverse effect associated with statins such as Lipobay is pain in the muscles (myalgia), which is due

**Continued on P29 ►**



# ONE MAN AND HIS DOG WIN GOLD IN NEW YORK

BACK ON  
TV MAY '97



The Sensodyne TV commercial has simply kept taking the 1996 International Advertising and Marketing Showrooms by storm in New York. The leading up and driving force in creating the campaign. After Sensodyne's worldwide success in 1995, the brand is now leading the way in the marketing sector.

In pharmacies alone Sensodyne is selling its lines faster than all other sensitive toothpaste, and set to drive faster still. This year the brand behind Sensodyne exceeds \$2 billion and nationwide TV advertising returns to May '97. So stock up because customers will be looking in.

## STOCK UP WITH SENSODYNE AND STRIKE GOLD

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# COUNTERpoints

## Rennie tackles trapped wind

Roche Consumer Health is launching a new product, Deflatine, aimed at the thousands of women who suffer the symptoms of bloatedness and excess gas.

Consumer research carried out by Roche revealed that almost half the women in the UK (46 per cent) suffer from bloatedness or trapped wind. Although men also suffer, this appears to be more of a problem for women, who find the symptoms embarrassing, as well as painful.

The bloating is caused by a build-up of tiny air bubbles in the stomach. In small quantities they aid digestion, but certain foods, such as raw vegetables, breads and spices, as well as alcohol and fizzy drinks, can cause an excess to accumulate.

Rennie Deflatine tablets are formulated to specifically target these indigestion-related



problems. The active ingredients of simethicone, an anti-foaming agent, and calcium carbonate and magnesium carbonate, which neutralise excess acid, offer fast and effective relief.

Rennie Deflatine is a GSL product available in packs of 18 tablets with a recommended retail price of £2.99.

Supported by a £1 million marketing campaign in its first

year, Roche expects Rennie Deflatine to perform as well in the UK as it has across Europe. In France, Deflatine holds a 20 per cent incremental share of Rennie's total brand share. The campaign will include advertising in key women's press, sampling activity and informative and educational point of sale material.

**Roche Consumer Health.**  
Tel: 01707 366000.

## Calpol backs BLISS baby care '£ for lb' appeal

Warner Lambert will be targeting pharmacists and consumers in a major promotional campaign for its range of children's medicines.

Over 4,000 pharmacists will be involved in a Calpol link-up with leading special care baby charity BLISS. Collecting tins for the Calpol/BLISS

'£ for lb' appeal will be distributed to pharmacies from the end of May.

Customers will be asked to make a donation to the appeal and will receive the Calpol purple pansy emblem. The campaign will raise funds for special baby care

equipment in the UK.

To support this initiative, Calpol, Calgel, Drapolene, Abidec and Lyclear will feature in an advertorial campaign running in parenting publications from May until the end of the year.

**Warner Lambert Consumer Healthcare.**  
Tel: 01703 641400.

## Countdown to clever conception with Callanish

Callanish Nutritionals has launched Callanish one a day Folic Acid supplement.

The 400mcg tablets are formulated for mothers-to-be before conception and during pregnancy. It helps ensure the healthy development of the unborn child, especially the spinal cord and brain.



The Government recommends that women who are planning a pregnancy should take a 400mcg folic acid supplement from the start of trying to conceive until the 12th week of pregnancy.

A two-month supply (60 one a day capsules) retails at £2.29.

**Zyma Healthcare.**  
Tel: 01306 742800.

## Colofac IBS is new OTC mebeverine

Mebeverine, the leading prescription treatment for irritable bowel syndrome, is now available over the counter as Colofac IBS.

Launched by Solvay Healthcare, it contains mebeverine hydrochloride 135mg and is licensed for the relief of the symptoms of IBS in diagnosed patients. These include abdominal pain, cramps, wind, diarrhoea and constipation.

The drug is well tolerated and has no known interactions. It can be used alone or with a high-fibre diet.

The dose

for adults and children over ten years old is one tablet three times a day. The tablets should be swallowed whole with water 20 minutes before meals. The drug is not recommended for children below that age.

Colofac IBS (retail £4.99) comes in 15-tablet packs, which offer five days of treatment. If symptoms persist beyond two weeks, refer to the GP.

Solvay is backing the launch with a £1 million spend, including

advertising, PR and POS.

**Solvay Healthcare Ltd.**  
Tel: 01703 472281.



## Bright outlook for supplement range

Seven Seas is supporting its Cod Liver Oil Plus range with a £750,000 advertising campaign which breaks later this month.

Full-colour advertisements in the national daily press will support the combination range, which includes nine products.

"Full-colour advertising in what is

essentially a black and white medium makes the most of the range's bright packaging," says Tim Horne, Seven Seas' marketing manager.

The campaign will promote the convenience and value for money benefits of the range in an effort to attract new users into the market.

**Seven Seas Ltd.**  
Tel: 01482 375234.

## It's the Norton Pollenbusters!

Pollenbusters is a new campaign to promote Norton Consumer's hayfever products this summer.

By offering value for money prices, the promotion is designed to encourage customers to try different ways to prevent and relieve hayfever. Products include Hay-Crom Hay

Fever Eye Drops (sodium cromoglycate), which retail at \$3.99 for 10ml.

Available from May will be Nasobec Hayfever Nasal Spray (beclomethasone dipropionate), which will retail at \$5.39 for 180 sprays.

**Norton Consumer.**  
Tel: 01279 426666.



## Which Evening Primrose Oil would you recommend?

It is well known that Evening Primrose Oil is a rich source of gamma linolenic acid (GLA), a nutrient important in maintaining hormonal balance and healthy-looking skin. Scientific studies indicate that the GLA in Evening Primrose Oil may be more readily absorbed and biologically effective in the body than starflower oil.

### Naturally your customers want the best

However, not all brands of Evening Primrose Oil are the same. So how can you help your customers choose the one that's right for them?

For exceptional purity and quality we suggest you recommend **Efamol** Pure Evening Primrose Oil:

● Efamol Ltd is the leading specialist in Essential Fatty Acid research and has conducted most of the scientific research into the properties of Evening Primrose Oil; our products are thoroughly tested in humans with over 4000 people having been involved in research studies.

● We have a unique plant research programme which cultivates only the very best varieties of Evening Primrose.

● We use a special extraction process which avoids any chemical refining and which retains all the natural goodness of the oil.

● Our products are produced to pharmaceutical standards. The source and quality of the GLA is what is really important, and the GLA found in **Efamol** is one of the purest and most bio-active GLA available. It consistently contains 9% GLA (as a proportion of the total fatty acids).

● We only add natural Vitamin E which is a powerful antioxidant important in helping to neutralise free radicals and maintain long-term cell and tissue integrity. Natural Vitamin E is not always found in other brands.

**NEW Efamol PMP** Extra Strength Pre-menstrual pack combines **Efamol** Pure Evening Primrose Oil with Vitamin B6, zinc and magnesium plus other essential nutrients in a highly effective formula to provide something a little extra around the time of a woman's period.

For further information, please call the **Efamol** Information Service: 01483 570248

Efamol® is a registered trademark used under licence by Efamol Ltd.

Efamol Ltd, Weyvern House, Weyvern Park, Portsmouth Road, Peasmarsh, Guildford, Surrey, GU3 1NA.



Distributed for Efamol Ltd by Novartis Consumer Health  
Horsham, West Sussex RH12 4AB

# Efamol

On balance, **Efamol** Pure Evening Primrose Oil.  
One of the most effective sources of GLA.



# Sugar 'n' spice shades for the summer

Sweet-inspired shades dominate the new Bourjois Pastel Folies make-up collection, which is launched on April 15.

Straw yellow, pistachio green, soft orange and pale lilac combine for a pretty 'baby doll' look this spring/summer.

For eyes there are three luminous Pastel Eyeshadows (\$3.95) – Lumière Banane, Lumière Lilas and Lumière Pistache – plus Ciel Sublime Lumière Mascara (\$4.95).

The complexion is enhanced with Pastel Jous Blusher (\$4.75) in

Brun D'Or, a rosy beige; or Sepia, a shimmery brown.

Soft orange and pearly lilac are the new shades for lips and nails in Rouge Seduction Lipstick (\$4.45) and Shock Resistant Nail Polish (\$3.75).

● New, too, from Bourjois are Effet Lumière eyeshadow trios, which will be available on April 25. Available in three different colour harmonies, they are presented in a colour-co-ordinated round case with a push-button hinged lid



(\$4.95).

On May 1, Noir et Blanc, a black and white double-ended eye pencil, will join the Bourjois

range (\$3.25).

**Bourjois Ltd.**  
Tel: 0171 436 6140.

## Making faces with Almay

A new addition in the Almay range is Amazing Lasting Make-up.

This silicone-based, oil-free foundation is formulated to last for up to 16 hours. Antioxidant vitamins A and E help protect the skin from environmental problems, including dryness, heat and pollution.

The product contains a non-chemical SPF 6 sunscreen to help protect against the sun's harmful photo-ageing effects.

Hypoallergenic and 100 per cent fragrance-free, it is available in five shades – Neutral, Sand, Warm, Honey and Tan (\$8.95, 35ml).

**Revlon International.**  
Tel: 0171 629 7400.

## Colourful commercial campaign for Wella's Viva

Wella is investing \$3.1 million in a national TV advertising campaign for its new permanent home colourant – Viva Colour.

The commercial will be on-air from April 14 for five weeks, followed

by a second four-week burst in the autumn.

The aim of the campaign is to move perceptions of colouring from a functional chore to a luxurious treat. The ad features a woman

arriving home looking and feeling worn out. She takes time out from her work and family to treat herself to a new hair colour.

**Wella Great Britain.**  
Tel: 01256 20202.

## Nail care from Mavala comes right out of the blue

Mavala is introducing two new promotions for pharmacies. With blue being a fashion colour this summer, both packages include blue shades.

The 'Fascination' package features Marine Blue for nails and lips, along with other new summer shades (trade price, \$58, plus VAT).

Mavala Pastels

promotion features six delicate shades of polishes, including Baby Blue (trade price, \$56, plus VAT).

**Mavala UK Ltd.**  
Tel: 01732 459412.

## A new wave of home hair colorants

Clairol is introducing a new wave of home colorants with the launch of Hydrience, the first water-based permanent colour creme.

Enriched with sea proteins and minerals, Hydrience features a new technology which uses water to surround each colour molecule. The water molecules are attracted by the natural moisture in the hair, enabling Hydrience to saturate each strand with permanent colour.

The complete

moisturising system consists of a blend of three conditioners, and sea proteins and minerals, which help protect and condition the hair during the colouring process.

The shade palette of 18 contemporary colours ranges from the lightest Mother of Pearl blonde to Black Pearl. Clairol Hydrience will retail at £5.49.

**Bristol-Myers Co Ltd**  
(Haircare & Toiletries Division).  
Tel: 01895 628000.

## Revlon's shades of summer time

Revlon has introduced new summer colours.

Iced Mocha, a pale coffee; and Bali Brown, a deep terracotta, are new in Moisture Touch Lipstick (£7.25) and matching Nail Enamel

(£5.95). New for eyes are Leaf, an olive-green khaki; and Smoke, grey, in Age Defying Eyecolours (£6.95).

**Revlon International Corporation.**  
Tel: 0171 629 7400.

## Essential oil help is at hand from Empress Cosmetics

Empress Cosmetics has launched two new body care products – Approach hand cream and Exception lemongrass massage cream.

Enriched with essential oils and vitamin E, the hand cream is designed to moisturise and protect dry and rough hands. It is also formulated to help strengthen the nails.

The product includes UVA/UVB protection with an SPF of 6 to help prevent premature ageing and wrinkling of the skin. It retails for \$7.99 (50ml).

The massage cream is formulated with lemongrass oil, which has antibacterial and

toning properties. It is designed to leave the skin smooth and toned without the greasy residue which can be left by oil-based massage treatments. A 500ml tub retails at \$9.87.

Both products have been clinically and dermatologically tested, and have not been tested on animals.

**Empress Cosmetics UK Ltd.**  
Tel: 0171 493 0303.

## Refreshing news for 4711 users

Wella is extending its 4711 Original Eau de Cologne range for this summer.

Latest additions include a portable 4711 Refillable Natural Spray Pen. Featuring a screw-on pump action spray, it is easy to refill (\$4.99).

New, too, is 4711 Ice – the Cool Stick, which contains a blend of refreshing menthol

ingredients in a push-up stick (\$2.99).

Available from the end of May will be 4711 Body Spray. It delivers a light, fragrant mist and is designed to be used after bathing or for an instant body refresher (\$2.99).

Counter units are available to prompt impulse purchase.  
**Wella Great Britain.**  
Tel: 01256 20202.





# Fight Back

against hayfever



Double action

# Zirtek™

contains cetirizine

#### Prescribing Information:

Each white, oblong, scored, film-coated tablet engraved Y/Y contains 10 mg cetirizine dihydrochloride. **USES:** Treatment of seasonal and perennial rhinitis and chronic idiopathic urticaria. **DOSAGE AND ADMINISTRATION:** Adults and children aged 12 years and over: One 10 mg tablet daily. In renal insufficiency halve the dose to 5 mg (1/2 tablet) daily. **CONTRAINDICATIONS:** Hypersensitivity to constituents. Avoid use in pregnancy and lactation. **PRECAUTIONS:** Do not exceed recommended dose, particularly if driving or operating machinery. **DRUG INTERACTIONS:** To date there are no known interactions with other drugs. As with other antihistamines avoid excessive alcohol consumption. **SIDE EFFECTS:** Mild and transient drowsiness, headache, dizziness, agitation, dry mouth and gastrointestinal discomfort have been reported. **PACKING, PRICE:** Pack of 7 tablets = £3.95. **LEGAL CATEGORY:** P.

**PRODUCT LICENCE NUMBER:** 5221/0001 **PRODUCT LICENCE HOLDER:** UCB SA Pharmaceutical Sector, Avenue Louise, B-1050, Brussels, Belgium. **MARKETED BY:** UCB Pharma Limited, Watford, Herts, WD1 1DJ. **DATE OF PREPARATION:** February 1997



For further information please contact:

UCB Pharma Limited.

Star House, 69 Clarendon Road, Watford, Herts, WD11DJ

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#### Novartis Consumer Health

Mill Road, Holmwood, near Dorking, Surrey RH5 4NU

Head Office Telephone 01306 742800; Fax 01306 743995;

Customer Service Telephone 01306 742299.



# TV dream to create a Sensation

Colgate Sensation makes its TV debut on April 14.

A major new pan-European advertising campaign uses dream sequences to convey excitement and the message that 'nothing feels like new Colgate Sensation deep clean'.

A man cleaning his teeth suddenly imagines himself leaping off a towering dam and plunging into a lake. Moments later, a woman brushes her teeth and shares the same experience.

The initial burst of TV advertising will run for



the next four weeks and will then move into the cinema until August 4.

The campaign is part of a \$4.2 million support package for the brand. Nearly two million

sample trial-sized toothpaste tubes and money-off coupons will be distributed during April and May.

**Colgate-Palmolive Ltd.**  
**Tel: 01483 302222.**

## Arkopharma's designs on display

Arkopharma has introduced a gels and capsules counter display

unit for its products.

It is designed to help pharmacies maximise on sales of Arkocaps herbal remedies for circulatory problems or aches and pains.

The unit contains 20 packs, including Phytorhuma, Phytovainetone and Phytovainetone Gel. Two packs of Phytovainetone Gel and two packs of Phytorhuma Gel are complimentary.

The promotion is supported with Phytovainetone Gel samples, Phytotherapy booklets and Arko-health leaflets.

**Ceuta Healthcare Ltd.**  
**Tel: 01202 780558.**



## Sporting chance

**Traxam Pain Relief Gel** is currently being advertised in national newspapers and on posters in 50 large sports and health clubs. Leaflets providing a guide to the causes, treatment of muscular aches, sprains and backache are also being distributed.

**Whitehall Laboratories Ltd.**  
**Tel: 01628 669011.**

## Stepping out

**Stepcheck** is a new leaflet on foot problems supported by a grant from Novartis. It aims to help people recognise common foot problems, their causes and treatment, and when to seek professional advice. Copies are available from: **Freepost Stepwise, Dept H, PO Box 5314, London W6 0GQ.**

## Put a spring back in your step

Scholl is launching three new foot care products in time for the seasonal uplift in the sector's sales.

Scholl Odour Control Gel will be introduced in May. Offering 24-hour protection, it has dual action antiperspirant and deodorant properties. It replaces Odour Control Cream, which has been discontinued. The recommended retail price is £3.79 for a 75ml tube.

May will also see the introduction of Heel Plus in Scholl's Hidden Comfort range – replacing Scholl Heel Cushions. It is designed with improved shock-

absorbing foam for cushioning and a Sure Grip base to prevent movement in the shoe. Available in two sizes, Heel Plus retails at \$2.49 per pair and comes with a three-month guarantee.

Comfort Fresh Insoles will be discontinued and replaced in July with an improved version – Comfort Fresh Plus Insoles (\$1.95 per pair). The new insole features Sure Grip foam to prevent slipping in the shoe. It also has a new airflow profile to improve cushioning and cooling effects.

**Scholl Consumer Products Ltd.**  
**Tel: 01582 482929.**

## ON TV NEXT WEEK

**Colgate Sensation range:** All areas

**Garnier Nutralia shower gel:** All areas

**Ibuleve:** G, B, Y, TT

**Johnson's Baby shampoo:** All areas

**L'Oréal Elvive Revitalising shampoo:** All areas

**New Radian-B Ibuprofen Gel:** All areas, except LWT, CAR

**Otex:** G, B, Y, TT

**Pantene:** All areas, except GMTV

**Pepcid AC:** TT

**Predictor home pregnancy test:** C4, C5, Satellite

**Rennie:** All areas

**Toepedo:** W, U, GTV

**Wash & Go:** All areas

**Wella Experience:** C4

**Wella Viva Colour:** All areas

**GTV** Grampian, **B** Border, **BSkyB** British Sky Broadcasting, **C** Central, **CTV** Channel Islands, **LWT** London Weekend, **C4** Channel 4, **U** Ulster, **G** Granada, **A** Anglia, **CAR** Carlton, **GMTV** Breakfast Television, **STV** Scotland (central), **Y** Yorkshire, **HTV** Wales & West, **M** Meridian, **TT** Tyne Tees, **W** Westcountry

### REGISTRATION FORM (COMPLETE CLEARLY IN BLOCK CAPITALS)

Fill in your name (as you wish it to appear on the CiCPM.)

Forename .....  
(all other initials as registered with the RPSGB or PSNI) .....

Surname .....

Registration No: RPSGB .....

PSNI .....

Pharmacy address .....

.....

County .....

Postcode .....

Tel no. ....

Fax number .....

E Mail .....

I enclose a cheque to Miller Freeman:

CiCPM part 1 \$117.50 (inc VAT) .... (\$ )

CiCPM part 2 \$235.00 (inc VAT) .... (\$ )

CiCPM parts 1&2 \$323.13 (inc VAT) (\$ )

Total .....

Send cheques and forms to Sue Chessman/Clare Newman, Miller Freeman, Pharmacy Group Special Projects, Sovereign Way, Tonbridge, Kent TN9 1RW (tel 01732 364422).

Additional single module copies at £100 per module (plus VAT of £0.60), will be available only to Chemist & Druggist subscribers or registered Community Pharmacy readers from Miller Freeman (Full set £40.00 plus VAT of £5.90).



### All you and your business needs - The Certificate in Community Pharmacy Management...

...produced in association with The School of Pharmacy, The Queen's University of Belfast, from Chemist & Druggist and Community Pharmacy, supported by Smithkline Beecham Consumer Healthcare (PharmAssist)

#### How to register

The ten modules for the first half of the course will come free to UK pharmacies through either Chemist & Druggist or Community Pharmacy (see insert with this module in this issue for full details). Pharmacists aiming to complete CiCPM must register with Miller Freeman and pay a fee of £100 to cover the first half of the course. (Registrants must subscribe to C&D or be on Community Pharmacy's mailing list.) The ten modules provide 50 hours of learning, or

half the 100 hours needed for the CiCPM. The fee covers project administration, registration and telephone marking, and three progress reports.

Pharmacists who wish to proceed to second 50-hour project stage must have registered with Miller Freeman for the module component. The second stage attracts a fee of £200 to cover course preparation, marking, access to a course tutor and certification by QUB. Pharmacists registering for both parts simultaneously can save £25.





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MILK, A SCOOP, AND A  
HANDY POWDER LEVELLER.  
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BUYS THE NUTRI-BOX CONTAINING A 450G  
FOIL PACK. WHEN THAT'S FINISHED, THEY  
BUY A NEW REFILL PACK  
CONTAINING TWO 450G  
FOIL PACKS FOR USE WITH  
THE BOX. BECAUSE THEY ONLY OPEN ONE  
PACK AT A TIME, ALL THE MILK STAYS  
FRESHER. AND BECAUSE IT'S A BOX,  
IT'S EASIER TO STORE AND STACK FOR  
YOU. THINK OF IT AS A MONEY BOX.





# Confidence tricks



**As the weather hots up, sales of deodorants peak. Sarah Thackray investigates whether the personal freshness companies have anything new up their sleeves for this summer**

**T**he holy grail in the deodorant business is the quest to develop a product which can deliver effective protection without leaving deposits on the skin and staining clothes. Now worth \$378 million, the total deodorant and body spray market has grown by 7 per cent (Taylor Nelson AGB Super-panel year end February, 1997).

**Aerosols have seen the most growth in the deodorant sector**

It is aerosols which have shown the most growth in the deodorant sector, particularly for men and women under 35.

While younger women are more likely to use an aerosol, older ones prefer the roll-on format and 70 per cent would be likely to pay more for a deodorant that doesn't mark their clothes, according to research by the Taylor Nelson AGB Personal Care Panel.

Elida Fabergé is known to have been developing a contact applicator, which specifically addresses the problems of dryness and deposits – the main reasons why consumers use aerosols. "Growth in this market has to come from innovative

technology," says Karen Ramsay, category trade manager at Elida Fabergé, which is currently involved in plans for a new addition to the Sure range this spring.

Brand leader in the deodorant market, Sure is being backed by an \$8m advertising campaign this year. In 1996, the brand accounted for 16 per cent of all deodorant advertising (MEAL/IML). This year's campaign has already begun with a re-edited version of the Sure 'Dune' TV commercial, which now features the new Cool White variant.

Designed to attract a new target audience of younger women (aged 16-25) to the brand, Cool

*Continued on P20* ➤



**Cool White hopes to attract younger users to Sure**



**Scuba and Marguerite help boost Right Guard aerosols**



**Icini is designed to give Natrel Plus younger appeal**





**Mum Sport is aimed at active men, as well as women**

◀ Continued from P19

White has a light and fruity fragrance, according to the company. It comes in aerosol and roll-on, both with a tick icon and a "24-hour intensive" strapline which appears across the range.

### Top protection?

Gillette is focusing on driving aerosol penetration this year by offering a new formulation for Right Guard which, it says, delivers "unbeatable" protection against wetness and odour.

This spring sees the launch of two new variants for Right Guard: Scuba and Marguerite. Available in aerosol only, Gillette says that Scuba is a fresh, invigorating fragrance. It comes in a brilliant blue can which features a Caribbean shoreline. According to the company, Marguerite is a light, flowery fragrance presented in a subtle, lavender blue metallic-finish can. It comes in both aerosol and roll-on formats.

Gillette is also launching a new Natrei Plus fragrance in both

aerosol and roll-on format. Called Icini, the company says this fresh, invigorating fragrance with its lime green graphics is designed to attract younger women. Gillette is confident that the striking colour will help to generate maximum presence on-shelf and strengthen the brand's appeal to a young target market.

The new fragrance is incorporated into the micro-encapsulated aerosol formulation with its temperature sensitive ingredient encased in a natural 'corn shell'. As body heat rises, the shell dissolves to release more freshness protection.

A total of \$8m is being invested in advertising for Right Guard and Natrei Plus, which includes a national TV campaign for both brands. The new Right Guard advertising will break in May with four months of coverage featuring the new Scuba variant. Key theme for the campaign is the 'double-action protection' offered against wetness and odour. Natrei Plus is on TV this month with a commercial featur-

ing Icini and reinforcing its natural freshness positioning.

A new Mintel report on deodorants and body sprays suggests that the greatest growth opportunities will come from encouraging consumers to regard these products as occasion-specific. "Manufacturers will do well to encourage consumers to develop a repertoire of deodorants and body sprays suitable for day or evening, for sports or leisure use," says the report.

### Sporting chance

Bristol-Myers has just launched Mum Sport, which the company hopes will appeal to active men as well as women. Despite the brand's overtly feminine name, it is already used by around 500,000 men in the UK. "The launch of Mum Sport opens up a new unisex opportunity for the brand in this country," explains Laz Robinson, category development manager for Mum. "In some other European countries, Mum is already established as a unisex brand."

Packaged in brilliant blue, it comes in aerosol and roll-on which (along with the other Mum variants) has been repackaged in a white plastic bottle with a fresh, modern appeal. Its launch will be backed by a \$1.5m national TV campaign starting in May and running throughout the summer. In addition, sports bra supplier Triumph will be running

a summer gift with purchase promotion, which will result in sampling 75,000 Mum Sport roll-ons.

Bristol-Myers has also introduced its Mum unperfumed variant (previously only available as a roll-on) as an aerosol. Ms Robinson comments: "The unperfumed sector is growing at 25 per cent per annum – seven times the overall category growth rate. Younger consumers prefer aerosols, but may require one that will not compete with their fine fragrance."

More consumers will opt for aerosols this year, according to Nicola Keeble, commercial category manager for Bodycare at Colgate-Palmolive. She says: "While the number of consumers using aerosol antiperspirant deodorants is increasing, these users are also using aerosols more liberally, treating them more as a body spray rather than just confining them to under-arm usage. This trend will continue, particularly among the younger audience, and that means that consumers will use more product per application, driving volume growth."

Colgate-Palmolive has relaunched its Soft & Gentle Amber Mist variant with a new fragrance and has introduced vibrant flashes on the brand's aerosol packs to highlight the message that the formulation leaves no white residue. Three 'new Invisible Dry' stickers on



**Updated Soft & Gentle packs have feminine appeal**

take care





### ID brings latest fragrance trends to the Impulse line-up

the lid of each product are designed to reassure consumers that the product offers invisible protection with no white deposit.

The company is backing this female-targeted range with a

\$3.5m support package. Last year's humorous 'Girls' Talk' TV advertising campaign, which won the 1996 *New Woman* magazine beauty awards for best advertising campaign, will be run on TV intermittently from May to August, when the campaign will move into the cinema for two months.

Humour will also be the focus of a forthcoming press and radio advertising campaign for Arrid Extra Dry. From May, Julian Clary will be the new 'arnupit' for the brand. "Renowned for his risqué performances and individual style, Julian's recent success with his TV programme, 'Sticky Moments', made him the perfect candidate for Arrid's latest advertising concept," says Tim Turner, brand manager at Carter-Wallace. "The radio commercial is quite a departure from anything that has been done before and really exploits Julian's dry sense of humour."

The aim of the campaign is to present Arrid in a more light-hearted and approachable way, and to encourage people to take a fresh look at the brand. To encourage trial, the press advertising will feature 10 million "20p off" coupons.

### Technological impact

Recent developments in fragrance technology are making an impact on the body spray market. 'Headspace' technology can identify and replicate natural ingredients in a synthetic form, which ensures a constant supply and is cheaper to produce than natural formulas.

A new Mintel report predicts that the market for body sprays is set to rise strongly, with 16 per cent growth across men's and women's products between 1996 and 2000. It forecasts that men's body sprays will show the largest growth (up by 20 per cent in the next four years), emphasising the continued opportunity for growth across men's grooming products.

Women's body sprays are predicted to increase by 10 per cent in the same period as this product sector permeates across the age spectrum from its teenage origins. Targeted at young women aged 11-21, Impulse dominates the \$53m female body spray market with a 10 per cent share (IRI Infocan year end 1996).

As fine fragrance trends move towards fresh yet warm and sensuous fragrances, like the new eKbe or Chanel Allure, body spray marketers look to the prestige category for inspiration. This year's new Impulse variant was developed by the US's most sought after fragrance consultant, Ann Gottlieb - the 'nose' behind eKone and eKbe for Calvin Klein. She has created Impulse ID to have a "light, oriental touch that radiates warmth, comfort and freshness" in line with latest fragrance trends.

Ms Ramsay at Elida Faberge explains: "New trends for 1997/98 are moving away from the citrus notes, which have recently been popular, to fragrances with more comfort and depth. ID's top notes of soft honeysuckle, lavender and clementine blend with a heart of muguet, sweet pea and green tea. Musk, vanilla and a touch of amber add the final signature."

Elida Faberge aims to bring prestige fragrance trends to the mass market as quickly as possible. "The company introduces a new Impulse variant every year," says Ms Ramsay. "Awareness of the new fragrance is always high and it is the top seller in the range within only six or seven weeks."

Backed by a total \$4.2m support package for Impulse this year, the new ID variant is featured in a TV and press campaign. It uses bar code imagery to reveal the identity of three girls from different walks of life - a surfer, stylist and DJ. Each girl's bar code portrays personal elements of her life, like favourite clothes, pastimes and

### Top five brands

- 1 Lynx
  - 2 Sure
  - 3 Right Guard
  - 4 Impulse
  - 5 Natrel Plus
- Source: Taylor Nelson AGB  
Superpanel year to February '97

places. ID is also featured in an interactive bus shelter phone-in competition. The idea is to guess the celebrity's identity from the mass of belongings featured on the poster.

### Boy's own

Looking ahead to the new millennium, the main growth in body sprays and deodorants is likely to come from men's products, according to Mintel. The combined men's market is forecast to grow by 18 per cent over the rest of the decade. This will be as a result of current users moving into older age ranges and the increased demand for male specific, or occasion specific, items such as the 'active for men' variants.

Male deodorants and body sprays now account for 53 per cent of male toiletries sales (IRI MAT December, 1996). According to Taylor Nelson research, penetration is growing fastest among 25-41 year olds. Brand leader in the total deodorant and body spray market, Lynx plays the leading role in driving market growth in male toiletries. Elida Faberge's research shows that 25 per cent of all males use a Lynx product every week.

With a \$7m advertising spend for Lynx this year, the company is investing 10 per cent more than last year to support this brand. As in the female body spray market, the company's strategy is to create fresh interest by introducing a new fragrance every year. Each new

Continued on P22 ►



### Value for money is the key for Smith & Nephew's Limara body spray (£0.99)



You know that taking care of your customers' interests helps you to take care of your bank balance. That's why the Care range of competitively priced OTC medicines from Thornton and Ross is the ideal brand for the independent pharmacist. You can assure your customers that Care products provide the kind of effectiveness they normally expect from more expensive brands, but at a price they will find very attractive (and at an attractive margin too!) And if your customers are happy, they will come back time after time. So, to take care of your customers, take Care!

*The brand for independent pharmacists*



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## Problem perspiration

A new Mintel report on deodorants and body sprays points out that pharmacies can benefit by taking advantage of their ability to offer advice, particularly for problem perspiration products.

A comprehensive pharmacy training guide on the causes, diagnosis and treatment of perspiration is available from Stiefel Laboratories. A protocol sheet for pharmacy assistants is also included. The company is supporting its category 'P' Driclor Solution, the OTC version of Driclor for excessive perspiration, with advertising in women's magazines and on Capital Radio.

Mike Hughes, Driclor marketing manager, says: "Our consumer research shows that regular antiperspirants or deodorants are less than fully effective for a large number of women. In our research, 66 per cent of all women who experience perspiration still suffer from wetness when using their regular product. Driclor offers long-lasting relief from a condition which may extend from late teens and is designed to treat all problem areas, including underarms, hands and feet."

To create maximum impact in pharmacies, a range of POS material is available, including a small counter display unit, a window display card and shelf edger.

Stiefel also runs an 'excessive perspiration' Freefone hotline, which is promoted through the consumer press. Customers can call the helpline on 0800 626875.

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variant brings extra growth for the brand and the market. The company reports that new Inca looks set to outperform last year's Atlantis launch.

Unlike the crisp, revitalising Lynx fragrances, Inca is the first spicy member of the range. Like new Impulse ID, it has been created for the company by Ann Gottlieb. It combines nutmeg, cardamom, sandalwood, vanilla and musk to create a "sensual, warm and masculine" fragrance. Inca is available in aftershave, shower gel, body spray, roll-on and deo-stick.

An avant garde promotional campaign for the new variant is taking it into clubs around the UK. Inca-scented postcards are being placed in 180 'style bars' nationwide and fixed into men's style magazines. Lynx has also teamed up with the Fantasia dance record label to produce a 'House Collection Volume 5' CD which is being advertised in the press, at cinemas, on TV and posters. The idea behind the campaign is to give the new fragrance youth icon status without commercially compromising its mass market profile.

Gillette is setting out to fuel growth within the APD category by educating men on the product benefits of its Gillette Series antiperspirant deodorant with a \$4.5m TV advertising campaign breaking this month. David Bashaw, northern Europe marketing manager, comments: "The opportunity within the male APD sector is huge. Fragrance just isn't enough and we are determined to educate men on the lasting performance our products have in preventing sweating and odour. Let's face it, this category is all about confidence!"

## As teenage girls are all-important to sanpro companies, Sarah Thackray looks at what's being done to woo these newcomers to the marketplace

A 13-year-old daughter can be a nightmare for her parents, but she's a VIP for the sanpro companies because along with those high telephone bills, she starts ringing up sanpro sales for the first time. And the brand chosen by a girl when she first starts menstruation is often the one she uses for life.

So, it's not surprising that the sanpro companies are keen to 'catch 'em young' and education plays a key role in the promotion of this market. Today's teenagers receive information from a variety of sources, with schools playing a far greater advisory role than in the past. Gone are the days of the biology mistress or school librarian lecturing pupils about puberty. It's far more likely to be the school nurse who counsels girls on menstruation in a more open and interactive way, and the sanpro companies are quick to be on hand to assist.

For the past three years, Bodyform's successful 'Bodyclocks' resource pack has been provided free to teachers and school nurses to help explain the important, yet often difficult, topics of puberty and menstruation to male and female pupils aged 9-13. Sancell reports that Bodyclocks has been used by about 80 per cent of secondary and middle schools in the UK. This year, the company has introduced sample packs of both towels and liners with Bodyclocks in a move which has apparently been welcomed by teachers.

The teenage magazines also play a vital role by providing girls with responsible information couched in 1990's language. Sancell is targeting teenagers in a major PR campaign from this

month, which is aimed at getting Bodyform into the headlines of the teen titles. This fun, lively campaign is designed to encourage more younger users to try ultra thin towels and panty liners. Competitions and sampling will be a feature of the campaign, which runs until September. Overall, the company is investing \$6 million in supporting its Bodyform range, which includes TV advertising, as well as promotions and sampling.

## Boxing clever

"Teenagers are an extremely important market for any sanpro company," says Shelley Law, marketing manager for Lil-lets. "In many cases, girls remain loyal to the brand selected when they first start their periods."

In an attempt to secure loyal users for the future, Smith & Nephew is introducing a special Lil-lets Applicator pack aimed at encouraging trial within the teenage market. The company predicts key purchasers will include mothers buying the packs for their daughters, as well as first-time users.

The Lil-lets Teens pack contains three panty liners, six non-applicator and eight applicator tampons of different absorbencies, all packaged in a bright, eye-catching box. Designed to introduce girls to the Smith & Nephew sanpro range, the pack allows them to find the most appropriate product to suit their individual menstrual needs. An in-box leaflet provides helpful information on periods, how to use tampons and the importance of matching the appropriate tampon absorbency with an individual's flow.

Lil-lets Teens is being supported by a \$400,000 advertising campaign in the teenage press in April and May. In addition, Lil-lets will be supported by a \$5m promotional package during the next year. This will include TV and radio advertising, together with a PR programme designed



Julian Clary is Arrid Extra Dry's new 'armpit'

Continued on P24 ▶



**ZOMIG'**  
 Consult Summary of Product Characteristics before prescribing. Special reporting to the CSM required.

**Use:** Acute treatment of migraine with or without aura.

**Presentation:** Tablets containing 2.5mg zolmitriptan.

**Dosage and Administration:** The recommended dose of 'Zomig' to treat a migraine attack is 2.5mg. If symptoms persist or return within 2 hours, a second dose has been shown to be effective. If a second dose is required, it should not be taken within 2 hours of the initial dose. If satisfactory relief is not achieved, subsequent attacks can be treated with further doses.

**Effectiveness:** In patients who respond, significant efficacy is apparent within 1 hour of dosing.

**Frequency:** In the event of recurrent attacks, it is recommended that the total intake of 'Zomig' in a 24 hour period should not exceed 15mg.

**Contraindications:** 'Zomig' is not indicated for prophylaxis of migraine.

**Precautions:** Safety and efficacy of 'Zomig' in paediatrics, adults over the age of 65 and patients with hepatic impairment have yet to be established.

**Contra-indications:** Hypersensitivity to any component of 'Zomig' and uncontrolled hypertension.

**Warnings:** **Precautions:** A clear diagnosis of migraine must be established. Care should be taken to exclude other potentially serious neurological conditions. No data in hemiplegic or familial migraine.

**Contraindications:** 'Zomig' should not be given to patients with Wolff-Parkinson-White syndrome or arrhythmias associated with other cardiac accessory conduction pathways. 'Zomig' is not recommended in patients with ischaemic heart disease. In patients with unrecognised coronary artery disease, is likely, cardiovascular evaluation prior to commencement of treatment is recommended.

**Interactions:** With other 5HT<sub>1D</sub> agonists, atypical sensations over the precordium have been reported after administration of 'Zomig', but in clinical trials these have not been associated with arrhythmias or ischaemic changes on ECG. 'Zomig' may cause mild transient increases in blood pressure.

**Contraindications:** Patients should leave at least 6 hours between taking an ergotamine preparation and starting 'Zomig' and vice versa. Concomitant administration with other 5HT<sub>1D</sub> agonists within 12 hours of 'Zomig' treatment should be avoided.

**Contraindications:** Maximum intake of 7.5mg of 'Zomig' in 24 hours is recommended in patients taking a MAO-A inhibitor. Caution in pregnancy and breast-feeding. Use is unlikely to result in an impairment of the ability to drive or operate machinery. However, somnolence may occur.

**Unpleasant Effects:** Nausea, dizziness, somnolence, warm sensation, asthenia and dry mouth have been the most commonly reported.

**Abnormalities or disturbances of sensation:** Have been reported; heaviness, tingling or pressure may occur in the face, neck, limbs and chest (no evidence of ischaemic ECG changes), as may myalgia, muscle weakness, paraesthesia, dysesthesia.

**Legal Category:** POM.

**Product Licence Number:** 12619/0116.

**Price:** NHS Cost 3 tablet pack (2.5mg) £10.00. 6 tablet pack (2.5mg) with blister £24.00.

**Trademark:** 'Zomig' is a trademark of the Zeneca group of companies.

For further information is available from:  
 Zeneca Pharma, King's Court, Waterlooway, Warrington, Cheshire SK9 5AZ.

# THE NEW FACE OF MIGRAINE



'Zomig' is a new way of thinking about migraine,  
 offering rapid migraine relief and  
 consistent efficacy, time after  
 time after time...

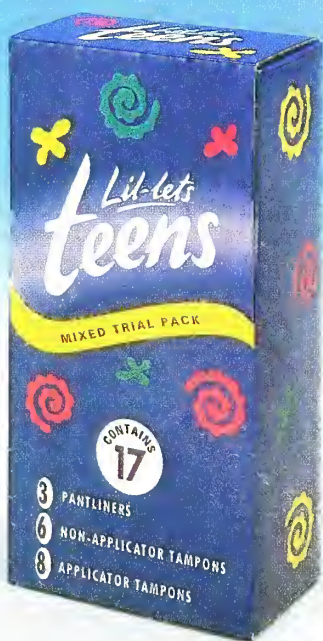
# Zomig

IT'S A NEW TIME





Bodyform thick non-wing towels are being promoted with extra fill packs



Lil-lets Teens pack introduces young girls to the brand

◀ Continued from P22

to stimulate both awareness and trial.

Tambrands is targeting young teenagers with its new Tampax

'Blue' campaign which is running throughout 1997 in all leading teen titles. It uses humour to address key issues and concerns among young females – discretion, reliability, protection and ease of use. Featuring cartoon characters and 'teen speak' copy, the campaign tackles these issues upfront in a user-friendly and relevant way. The advertising invites readers to write in for a free sample of Mini Tampax, which is specifically aimed at young girls.

The company hopes to boost sales of its Tampax non-applicator brand to older teenagers with a 'pencil sharpener' advertisement which highlights the comfortably-shaped tampon. This intensive press campaign is currently appearing in older teen titles.

Tambrand's recently launched Tampax Satin is currently on TV in a three-month campaign on mainstream commercial stations. Women's press advertising will appear from May onwards as part of a total \$3m marketing support programme for this applicator tampon.

Applicator products tend to be more popular than non-applicators with girls who have recently started their periods, because the tube makes them easier to

guide into place. However, once confidence in using tampons has been established, non-applicator tampons can provide added discretion, as they are easier to fit into a pocket or purse.

## Teenage opportunity

Because teenagers are new to the market place, they are seen as "a big opportunity" by Johnson & Johnson in developing sales of panty liners. Brand leaders in this category with Carefree, the company targets teenagers with its panty liner advertising. The company is spending around \$1.5m on advertising panty liners in teenage and women's magazines this year.

A J&J spokesman comments: "The size of this category can be significantly increased by marketing panty liners as more of a toiletry than a sanpro product. The growth opportunity will come from increasing usage of these products beyond menstruation. Sales have been very successful for Carefree Breathable, which has no plastic backing and is specifically marketed for use in between periods."

But why would any woman want to start wearing a panty liner in between periods? In research, some women have described this idea as 'a prison sentence'. J&J's spokesman admits: "It can be difficult to convert established users, but it is much easier to communicate with teenagers right from the start."

J&J looks to European trends as an sign of the potential for expanding the use of panty liners. Sixty-eight per cent of German women purchase panty liners in comparison to 39 per cent of women in the UK. Research shows that German women who buy panty liners use 24 per month in contrast to purchasers in the UK who only use six per month.

Panty liners have already gained popularity in the UK – the market has grown by 16 per cent in the last year (Taylor Nelson AGB Superpanel February, 1997). Indeed, panty liners have just been voted one of the top ten most important innovations for women in the past 25 years, according to a survey published by *Cosmopolitan* magazine. Over 2,000 women took part in the survey, which investigates all aspects of life in the 1990s.

## Wardrobe approach

"As many as one in five women now choose to use liners in between periods as part of their everyday hygiene routine," says Kristina Nordsten, brand manager for Bodyform (number two in the panty liners market). "Intermenstrual protection provides everyday freshness, more

## Top brands

### Towels

- 1 Always
- 2 Bodyform
- 3 Kotex

### Tampons

- 1 Tampax
- 2 Lil-lets

### Panty liners

- 1 Carefree
- 2 Bodyform
- 3 Always

Source: Taylor Nelson AGB Superpanel year to February '97.

confidence and adds security on uncertain days. A 'wardrobe approach' is now being adopted by many younger women when choosing sanitary protection. Teenagers may choose tampons for sports, towels for night-time and panty liners for use in between periods."

A trend towards increased 'repertoire' usage among the under-16s is highlighted by Taylor Nelson AGB, which also reports an increase in towel usage from the 18-24 age group. Ms Nordsten comments: "Whereas young girls of 16 or 17 used to automatically turn to tampons, today's younger generation often stay with towels which offer leakage protection, comfort and discretion."

Latest technology has meant that ultra thin towels can give improved product performance and this is the fastest-growing sector of the towel market, which has seen a shift away from thicker towels to ultra thin alternatives. Winged products are gaining in popularity because they offer added protection for no additional cost to the consumer. There is also a trend towards single wrapped products which are more discreet to carry around and hygienic when it comes to disposal.

Anxiety about Toxic Shock Syndrome has played its part in some girls' decisions to use towels instead of tampons. Tambrands, brand leader in the sanpro market, takes an upfront, educational approach to explaining TSS to girls through the pages of the teenage magazines. For example, a Tampax promotion in a recent issue of *Bliss* explains who can get TSS, how to recognise it and what girls should do if they think they have it.

The good news is that issues which surround the once taboo subject of sanpro are now far more openly discussed than a generation ago. Today's girls are informed, have strong opinions and, in the words of their Spice Girls idols, know what they 'really, really want!'



Tampax Satin is the latest tampon to join the Tampax line-up



# Fungal infections? No sweat with Canesten Hydrocortisone

The OTC launch of Canesten Hydrocortisone is set to stimulate significant growth in the skin irritation market. Canesten Hydrocortisone cream is the first dual-action treatment for sweat rash (candidal intertrigo) and has been made easily available for sufferers, offering pharmacists an excellent opportunity to capitalise on the product's significant benefits. Canesten Hydrocortisone promises to "get rid of sore, red, itchy sweat rash fast".

Nothing is more effective than Bayer's latest POM to P switch, Canesten Hydrocortisone. It is the only OTC treatment to combine the anti-fungal and anti-bacterial clotrimazole to clear the infection, with hydrocortisone to soothe and relieve the symptoms of sweat rash.

Although sweat rash is a very common fungal condition, it's probably one that's least understood by sufferers. In-depth consumer and pharmacy research, conducted for Bayer, reveals a 60 per cent awareness among pharmacists of sweat rash, although there is little understanding of the correct cause and treatment.

## Bayer leads the way

Bayer's research also reveals that the sweat rash market falls into three main target groups. Currently sufferers are either treating inappropriately, not treating at all due to dissatisfaction with previous treatments, or are simply not aware that they're suffering from sweat rash. With a comprehensive education programme planned by Bayer, significant opportunities will open up for pharmacists enabling them to capitalise on this new emerging market.

The principal concern of



many sufferers is relief of the symptoms. In fact, many are not only unaware that they are suffering from a fungal infection which needs to be treated but that the cause of their sweat rash can be effectively treated with Canesten Hydrocortisone.

## What is sweat rash?

● Sweat rash is caused by a fungal infection that appears as a red rash. It can become sore and macerated and is commonly found in skin folds.

## Who suffers from sweat rash?

● The condition is common in

both men and women, with incidences more common during the summer.

● The following groups are also particularly susceptible:

- 1 sports people
- 2 people enclosed in hot working conditions
- 3 pregnant women, particularly in the summer –

most commonly affected areas are under the breasts or stomach

4 overweight people.

Sweat rash can be found anywhere on the body where the skin rubs against itself or clothes, although men and women tend to be affected on different areas of the body.

Bayer's research discovered that men usually suffer around the groin, on the back, under the arms and behind the knees. Women mainly suffer under the breasts and at the top of the legs, although some also suffer under the arms, at the base of the back and between the buttocks.

With a \$1 million support campaign, tightly targeting specific groups of sufferers with a specific message, Bayer is aiming to raise rapid awareness of both the condition and treatment, encouraging footfall into pharmacies. Bayer aims to bring instant growth and increase profit margins for pharmacies through this major POM to P switch.

Canesten Hydrocortisone contains 1 per cent clotrimazole and 1 per cent hydrocortisone (rsp £4.49).



## Product Information

**Presentation:** Canesten Hydrocortisone, 15g cream contains clotrimazole BP 150mg (1 per cent) and hydrocortisone EP 150mg (1 per cent) **Indication:** treatment of the following skin infections where co-existing symptoms of inflammation, eg itching, require rapid relief 1) athlete's foot, 2) candidal intertrigo. **Administration:** Canesten Hydrocortisone should be thinly and evenly applied to the affected area twice daily and rubbed in gently. The maximum period of treatment is seven days. **Contra-indications:** use on broken skin, use on large areas of skin, use for periods of longer than seven days, hypersensitivity to any of the ingredients, to treat cold sores or acne, use on the face, eyes, mouth or mucous membranes, children under ten years of age unless prescribed by a doctor, pregnancy and lactation, unless prescribed by a doctor, use on the ano-genital area, unless prescribed by a doctor, to treat ringworm, unless prescribed by a doctor, to treat secondarily-infected skin conditions, unless prescribed by a doctor. **Special Warnings and Precautions for Use:** As with all corticosteroids, long-term continuous therapy to extensive areas of skin should be avoided. Therefore, treatment should be for a maximum period of seven days. Care should be taken not to cover the treated area with a tight bandage or dressing as this may increase absorption of hydrocortisone. **Pregnancy and Lactation:** Canesten Hydrocortisone should be used in pregnancy and lactation only when considered necessary by the clinician. **Undesirable Effects:** Rarely, patients may experience local, mild burning or irritation immediately after applying the cream. Hypersensitivity reactions may occur. **Product Licence Holder:** Bayer plc, Bayer House, Strawberry Hill, Newbury, Berkshire RG14 1JA. **Rsp:** £4.49 **Prepared:** January, 1997.



# Financial support for European task forces

The National Pharmaceutical Association and the Royal Pharmaceutical Society are to help finance two UK pharmacy representatives on Europharm Forum task forces.

The Forum comprises representatives of the World Health Organisation's European Region and its national pharmacy organisations. The task forces seek to promote the pharmacist's role and develop pharmacy practice models that will encourage good practice within Europe, the NPA Board was told at its meeting at the end of March.

There are currently five task forces and the UK is already represented on two – 'Questions to Ask About Your Medicines', and 'Smoking Cessation'.

Asthma is likely to be among the two additional task forces in which the UK will become involved.

**Refrigerated lines** Local negotiation with wholesale depot managers is the most effective route for any pharmacist who needs to return a refrigerated product to a wholesaler, the NPA has decided, following corre-

spondence with the British Association of Pharmaceutical Wholesalers.

Members will be reminded to take extra care when ordering refrigerated lines, but, if a mistake is made, to contact the depot manager immediately. If return of the product is agreed, they will need to ensure the product is stored correctly and returned on the next visit of the wholesaler's driver.

**Primary Care Rheumatology Society's symposium** A meeting between the NPA and the Primary Care Rheumatology Society, a group of GPs and consultants with an interest in rheumatology, has discussed the possibility of establishing a model protocol for pharmacists and doctors working together in the treatment of arthritis. As a first step, the NPA has agreed to take part in a workshop at the PCRS Symposium in Harrogate this month.

**Environment and health** The NPA has questioned the need to make 'the environment' a sixth 'Health of the Nation' target. Replying to a consultation docu-

ment from the Department of Health, the NPA highlighted the fact that it was already incorporated into the five existing targets and therefore integrated into all aspects of public health.

## Business services

● A new practice leaflet will be offered to members in addition to the existing two-page leaflet. The new four-page leaflet has air-brushed graphics and the extra space enables members to choose from a number of optional paragraphs outlining different pharmacy services.

● There has been a good response to a survey form issued by NPA Database Services. Following concern about companies gaining access to this information, head of business services Trefor Williams reiterated to the Board that members' interests would not be compromised. The information would be leased out under strict controls.

● A 'Symptoms Hit List' display card is now available. The hang or stand board reminds customers of the type of ailments about which they can ask the pharmacist for advice.

● Perimeter security. RoMEC Security, a division of Royal Mail specialising in perimeter security, is to be promoted as an NPA approved service. Other companies offering similar services are also being considered.

● The NPA Gold Card has now been launched and offers advantageous rates to holders.

**Tim Astill Memorial Fund** A cheque for \$1,000 from the Scottish Pharmaceutical Federation was presented to NPA chairman John D'Arcy for the Tim Astill Memorial Fund.

**RPSGB Benevolent Fund** The RPSGB's Benevolent Fund received \$1,901 from sales of NPA Christmas cards. A contribution of \$1 was made for every 30 cards sold.

**Pharmacy law and practice** PMI is again to sponsor the supply of this book to the Schools of Pharmacy. The new edition will be ready for distribution at the beginning of the academic year and will be given free to students embarking on the pharmacy law part of their degree. Last year, approximately 1,600 copies were issued.

## LETTERS

### Storm in a teacup

What a lot of fuss about nothing! I refer to the announcement by 3M and your article (*C&D* March 29, p23 and p40).

Yes, we did, for a short period, repackage Tegaderm dressings from boxes of 50 into sleeves of ten. This was done for the convenience of the dispensing pharmacist.

However, 3M acted within its (legal) rights to prevent us from labelling the sleeve with details of its contents, because the sleeve was not a 3M sleeve. The company chose to ignore the fact that the contents were 'original Tegaderm' manufactured by 3M in the same 3M factory as Tegaderm sold by 3M to UK wholesalers. It therefore follows that the repackaging was not 'incorrect' but 'unwanted by 3M'.

Yes, we did enclose an instruction leaflet in each sleeve and 3M alleged the leaflet to be defective. 3M failed, however, to notice that the leaflet was its very own!

Yes, we did pay a sum to 3M in compensation which it glamorises by describing it as an 'undisclosed sum'. That sum of £249.50. Can your

readers imagine that we were going to defend such a preposterous claim involving an allegation of such paltry damage?

3M has made its point. It will do whatever is possible to prevent the legitimate importation of its own products which it willingly sells at low prices in other countries.

Are we to conclude that Tegaderm is sold by 3M at a loss in those other countries, or are there questions to be asked regarding the price which our National Health Service is expected to pay?

**Keith Jay**  
Operations director,  
Stephar UK

### Lesson still to be learned

Even in Durrington, bad as it may be, I am still refusing to sell Unipath products.

I read with disbelief that Unichem has decided to go against its original course of action regarding Unipath's commitment to Boots. I am insulted on two counts, because a) Unipath is still going down the path it chose to take originally by not making Persona available to the independent until a year

after its launch and b) because Lord Blyth was quoted as saying it is the company's single best-seller.

Unichem should not have backtracked because a lesson has not been learned. If we forget what has happened, then we will be seen to be weak, meek and stupid. We must show that we mean

business and divert our allegiance to companies which have proved their support for us and will continue to do so. We don't need any more lip service and we definitely do not want to help companies whose priorities lie elsewhere.

**Sultan Dajani**  
Durrington



Pharmacist David Walker of Owen Jones Pharmacy in Ashby de la Zouch has won a luxury weekend at a health spa as part of a *C&D/Seven Seas* competition to promote the manufacturer's new High Strength Cod Liver Oil capsules. Seven Seas' area sales representative Phil Preece (left) presents Mr Walker with his prize, plus a year's supply of Seven Seas High Strength Cod Liver Oil



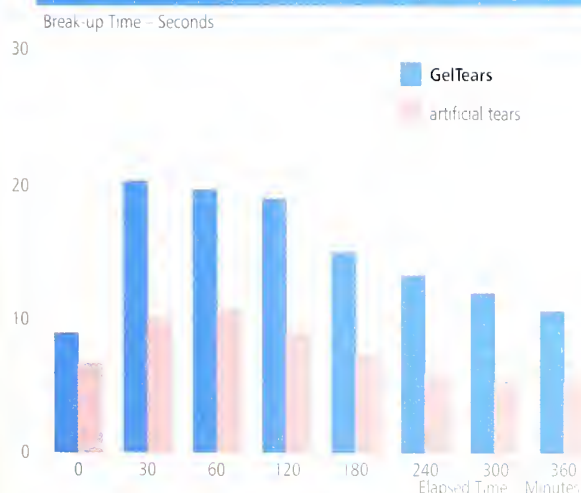
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**Special Warnings and Precautions for Use:** Contact lenses should be removed during treatment with GelTears. **Side Effects:** Corneal irritation may occur with prolonged use. Transient blurring of vision on instillation. **Drug Interactions:** No significant interactions have been reported. **Pregnancy & Lactation:** Safety for use in pregnancy and lactation has not been established. **Product Licence No.:** PL0033 0149. **Marketing Authorisation Holder:** Chauvin Pharmaceuticals Ltd, Ashton Road, Harold Hill, Romford, Essex RM3 8SL. **Basic NHS Price:** £2.90. **Legal Category:** P. **Date of Preparation:** August 1996.

**Reference:** 1. Marquardt R, Christ Th (1986) *Comparison of Contact Time of Artificial Tear Solution*. *Klin Monatsber Ophthalmol* **189**: 254-257.  
2. Menon R, et al (1988) *Dr. Eye Symptoms: A New Gel Treatment*. *British Journal of Ophthalmology* **72**: 119-121.  
3. MIMS January 1997.

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\*compared with alternative therapies3



Take four major OTC medicines, add a philosophy that concentrates on five core strategies, sprinkle the backing of an international company and you have Crookes Healthcare. **Guy L'Aimable** reports

# Simple is beautiful

**W**hat has a KISS got to do with Crookes Healthcare? It is not a new brand, nor is the company using a novel approach to 'woo' consumers and pharmacies.

KISS is an acronym for a basic principle: Keep It Simple Stupid, which guides Crookes' way of thinking. Behind the facetious facade is a serious business outlook. As Norman Usher, the company's managing director, explains: "If you can do three to four big things well in a year, you'll probably drive the business forward. It's very hard to do 20 big things in a year."

Mr Usher is concentrating on four or five strategies, whose details remain confidential for commercial reasons. "Prioritising is very important – perhaps more so in this industry because it's so complicated, partly due to the regulatory authorities," he says. And it is far easier to monitor the progress of a few major projects than a large number of relatively small ones, he adds.

That thinking suits Crookes' product portfolio, dominated as it is by Nurofen, Strepsils, E45 and Optrex. Each is brand leader in its particular category and all will play a crucial role in the company's future expansion.

It also reflects Mr Usher's marketing background. His business career began at Procter & Gamble in the UK, where he spent three years at its production division, then switched to marketing for seven years. P&G has a reputation among marketers for providing first class training.

After P&G, Mr Usher spent three years with Currys, the electrical retailer, then moved to Jeyes, where he was marketing director and general manager of the UK business.

Just over a year ago, he left Jeyes to join Crookes. Why? "I like the company and I'm very interested in the industry. It's an industry that's going through changes – it's exciting," he says.

Having moved to the company, Mr Usher discovered it was "in pretty good shape". He saw no need to upset the status quo. "Crookes is capable of tremendous growth, as is the OTC industry. It wasn't a case of a dra-



**Norman Usher, managing director of Crookes Healthcare**

matic change of direction, but a question of continuing with the growth strategy," he says.

Mr Usher has stuck to the business' policy of widening the appeal of its most successful brands. Over the past three and a half years it has launched five line extensions.

While it can be argued that Crookes lacks the high profile of multinational competitors, such as Smithkline Beecham, Mr Usher disagrees. Its profile, he says, has been raised considerably over the past two years through key launches, such as Nurofen Plus, its most successful P medicine, whose sales grew 92 per cent last year.

The company, he adds, is involved at grass roots level by providing staff training for community pharmacies, merchandising advice and category management. "That's an important area," believes Mr Usher.

Crookes' strength stems from its four major brands, although its managing director is aware that dangers lurk behind the 'eggs in one basket' approach. If one of the major brands fails, for

whatever reason, it takes with it a large chunk of revenue. "Of course you make yourself more vulnerable to that risk by having fewer products, but our large brands are well supported, and if we come under attack, we can increase that support," he says.

The nature of some of the manufacturer's OTC markets may work to its advantage. Skin care sales, for example, are divided between many companies. And throat care products range from Merocaine, the OTC brand, to Menthol Lyptus, which "is sold almost as a sweet". A new blockbuster OTC is unlikely to be launched in such markets.

As Crookes is a subsidiary of Boots Healthcare International (BHI) and, therefore, not quoted on the Stock Exchange, it is shielded from the City's relentless pressure for short-term profits. "We can concentrate on long-term objectives, maybe more so than companies who have to follow their audited OTC business," says Mr Usher.

He is guarded about what these objectives will produce. He will concede only that Crookes is

looking at POM-P switches and expects to launch some products within the next ten years.

Being part of an international company, its product strategy is tailored within a global framework. "Within that, I'm trying to apply the local executions of these ideas," he says.

Crookes could take on Lutsine anti-acne and Onagrine anti-ageing

creams from Laboratoires Lutsia, the French skin care company acquired by Boots last September. But it has not yet decided between that option and

selling the brands through Boots the Chemists instead.

Whatever benefits Crookes receives, Mr Usher says it wants to ensure that they are passed on to pharmacies. It is focusing on its supply chain to improve its deliveries. "We're trying to get 100 per cent customer service in terms of the goods we deliver – not just in stock but in support and promotion. That is an area where we could do better."

The company is also restructuring its sales area so that its trade marketing can focus more on pharmacies.

Whatever some observers might think, adds Mr Usher, Crookes is not biased towards Boots' own pharmacies. "Ultimately, our sales split reflects the way the market is split [between Boots' stores and community pharmacies' sales]." He does not think this will ever be different, although Crookes' proportion of sales through pharmacies in general could change when it launches new products.

As the company usually accounts for 20 per cent of BHI's turnover, its sales will probably top £55 million. Mr Usher is content to ensure its results remain consistently good.

"It's not a situation where there's a fundamental problem or weakness. Crookes is number two in OTC in terms of sales. Our target is to grow rather than to be specifically number one."

**Our target is to grow rather than to be specifically number one**



◀ Continued from P8

to the pharmacological action of this class of drugs.

A major advantage of Lipobay, compared with other statins, is that it has shown no clinically-significant drug interactions, notably with digoxin or warfarin. It should, however, be administered at least four hours after bile acid sequestering agents (eg cholestyramine) to avoid an interaction due to drug binding.

Lipobay is available in three strengths: 100mcg, 200mcg and 300mcg, with basic NHS prices for packs of 28 tablets of \$12.95, \$17.35 and \$18.20 respectively.

**Bayer plc. Tel: 01635 39000.**

## New insulins from CP

An expanded range of insulins, featuring bovine and porcine products, is now available from CP Pharmaceuticals. For the first time, animal insulins are available in 1.5ml cartridges for use with pen injectors.

The new range replaces the existing Hypurin, so all scripts must include the 'Bovine' or 'Porcine' suffix. Remaining Hypurin stocks should be used to fill prescriptions for Hypurin Bovine only.

The ranges, all 100 units/ml, comprise Hypurin Bovine Neutral and Isophane (10ml vial, \$16.80; five x 1.5ml cartridges, \$12.60), Lente and Protamine Zinc (10ml, \$16.80), Hypurin Porcine Neutral and Isophane (10ml, \$16.80; five x 1.5ml, \$12.60), Isophane 30/70 mix (10ml, \$16.80; five x 1.5ml, \$12.60).

**CP Pharmaceuticals. Tel: 01978 661261.**

## GW issues Lamictal side-effect warning

Glaxo Wellcome has issued a warning to health professionals regarding the use of its epilepsy treatment, Lamictal (lamotrigine).

Recent analysis of its clinical trial database has revealed a higher incidence of rash leading to hospitalisation in children under 12 years. The estimated incidence of this side-effect is one per 1,000 adults and children over 12, but this rises to between one in 300 and one in 100 in children under 12.

The majority of serious skin reactions occur within two to eight weeks of starting taking lamotrigine. In addition to age, the risk also appears to be increased when the drug is used in combination with sodium valproate (Epilim), the most common treatment for epilepsy; and when high initial doses of Lamictal are used.

**Glaxo Wellcome (medical information). Tel: 0800 413828.**

## Verapress MR 240mg

Verapress MR 240mg, the UK's first alternative brand of verapamil 240mg modified release tablets, is now available. Dexcel Pharma claims to have full supporting data demonstrating bioequivalence to the original brand. The basic NHS price for a blister pack of 28 tablets, complete with patient information leaflet, is £10.64.

**Dexcel Pharma Ltd. Tel: 01327312266.**

## Volital Tablets withdrawn

Marketing authorisation for Volital Tablets 20mg has been withdrawn with immediate effect. This action is the result of advice given by the Committee on Safety of Medicines to the Licensing Authority concerning the safety and efficacy of pemoline in the treatment of hyperkinetic syndrome in children. Therefore, Volital will no longer be available on prescription in the UK.

**Laboratories for Applied Biology. Tel: 0181 800 2252.**

## Paracetamol suppositories

Aurum Pharmaceuticals has introduced paracetamol 120mg suppositories, with each mould identified with drug, strength and batch number for extra security in hospital wards. A P category product, the basic NHS price is £9 for ten.

**Distribphar UK. Tel: 01895 837779.**

## Norfex discontinuation

3M Health Care has announced the discontinuation of Norfex (orphenadrine citrate) Ampoules 2ml with immediate effect. The licence for this product is still in force, therefore remaining stock may be used to supply existing demand until exhausted. No arrangements are being made for the return of stock.

**3M Health Care Ltd. Tel: 01509 611611.**

## Reformulated Desmospray

Desmospray (desmopressin), used to treat bedwetting, will be available in a new room temperature stable formulation from May 1. The previous formulation had to be stored in the fridge, making it difficult to use when the patient was away from home. The new formulation is available in a 6ml bottle (£28), which is sufficient for a month's treatment of 30 doses at 20mcg. The treatment is also now odourless after the replacement of the preservative chlorbutol with benzalkonium chloride.

**Ferring Pharmaceuticals. Tel: 0181 893 1543.**

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# Web

**All types of businesses are exploring ways of harnessing the Internet's powers. It's time community pharmacies did, too. Peter Judge and Christopher Ogg report**

**H**ype about the business applications of the Internet – and its corporate cousin, the Intranet, which concerns communication within a company – have reached fever proportions. A lot of the noise is being made by vendors who, 18 months ago, were decrying the Web as 'unstable', 'immature' and 'unreliable'. What's changed?

Money. A handful of businesses discovered, almost by accident, that the technologies of the Internet, applied to their private network, offered some rather unexpected benefits. The Internet had developed tools to enable people to exchange information across long distances and across totally different computer platforms. The networking tools were cheap and resilient. And the tools were innovative. A few examples include:

- the ability to circulate a memo or document to thousands of people by one click, and almost for free
- the ability to send files and documents instantaneously at an effective cost of zero (compare that with a fax).

Companies that had been paying millions of pounds to buy software with only a fraction of these capabilities suddenly started taking notice. And the big software vendors saw a new goldmine opening before their eyes. They faced one problem: most of the Internet software was either free or very cheap. But – and it's a big but – it was designed for enthusiasts. It came without the usual glossy manuals, detailed training and extensive support.

You can probably guess the

rest. We are now being swamped with expensive proprietary versions of all the tools of the Internet and the 'branded versus generic' issue is as alive in the computer world as it is in pharmaceuticals. Same issues, same arguments.

But what relevance – if any – does this have to a community pharmacy?

Let's start with the easy stuff. If you use a fax, e-mail offers a faster, better option. You can send original documents. You can send the same message to as many recipients as you want. You can ask for an electronic confirmation that your message has been received. Wherever in the world your message is going, you pay only for the few seconds of local call access necessary to send it. Even the fact that you don't have to buy fax paper is an advantage.

Of course, whoever you are sending to has to have e-mail, too, but it is a pretty safe bet that all your suppliers are already on it. Within two years, virtually every business and one-fifth to one-third of homes will be.

But there is more to communications than replacing faxes. Increasingly, suppliers are using the other tools of the Internet to provide a better service to their customers and to retailers. They can use 'push' technology – of which e-mail is the simplest example – to keep customers in touch with new products, special offers or important product news. They can use the 'client-pull' technologies to allow you access to a private Web site where orders can be processed on-line, where you can communicate with their staff and ask questions, or access specialist information. Within the next few months, electronic data interchange (EDI) developments will permit the system to be used for electronic commerce and payments as well. Your bank is already actively exploring this to give you real time access to your account information and to perform basic transactions.



The NHS has been exploring several aspects of the Web technologies with big budgets and big ideas. But the idea of an NHS Web that would link pharmacies, doctors, wholesalers and the NHS is still very much in its infancy. The biggest obstacle is the number of players – about 12,000 pharmacies, 25,000 GPs and all the ancillary services.

Web technologies are not limited to the wider Internet. Tools such as web browsers are simple to use and can help you utilise your computer more effectively. For example, you may keep customer, stock or product information in a database. A Web interface to this data is easy to set up, and anyone can learn to use it in minutes. Similarly, you can set up easy links between computers in two or more shops, or between home and shop, accessed by telephone.

The real beauty is that the necessary software is readily available on the Internet. You will find free tools to do all the tasks we have suggested in this article. If you have a Microsoft Windows set-up, Microsoft has most of the tools you need free at its site <http://www.microsoft.com>.

If you use your computer to fax, then you already have a modem, though you may want to update it to the higher speed options available (don't consider less than 28.8k bit/s). For less than £100, you can equip your computer for the Internet.

Internet access is cheap and starts from £10 a month for services like Demon, which also offers local call access anywhere in the country.

Once on-line, you can begin exploring some of the other business tools the Internet has to offer. Sophisticated and free search engines (Alta Vista <<http://www.altavista.com>> and Yahoo <<http://www.yahoo.com>> are two of the best known) mean you can make worldwide searches to source specific products in seconds.

You can visit the sites of your main suppliers and compare them with competitors: soon there will be special offers and incentives to persuade you to trade with them this way – because it is cheaper and easier for them as well.

You might add an e-mail address to the information you collect from customers and offer them a free electronic newsletter containing information or special offers to build customer loyalty. You will find that many of the community's institutions – schools and homes for the aged, for example – are on the Internet: a special site for them (quick and easy to set up with just a current generation word processor) might give you a competitive advantage.

A parting thought – the Internet creates an almost level playing field for the small to compete more effectively with the large. On it, a community pharmacy could provide a more effective service than Boots.

*Peter Judge and Christopher Ogg have written numerous books about the Web and the Internet. They edit a free e-mail magazine, WOT (Web Open Technologies).*



# Serious lack of pharmacists creates 'applicants market'

Recruitment problems in pharmacies have created an 'applicants market', according to a survey by the Institute of Pharmacy Management International. About one-third of pharmacies have "serious difficulties" in recruiting suitable pharmacists.

Last year, respondents recruited almost 1,000 pharmacists – three to four of the larger groups accounted for 700 of these.

Most pharmacists say there are fewer applicants than before and those who do come forward want higher salaries and better employment conditions.

Locums are also hard to find, particularly for pharmacies in remote areas. The worst hit areas are: Lincolnshire, East Anglia, Kent, East Sussex, parts of south west England, mid-Wales and north England.

Some respondents say locum agencies have driven up the hourly rates demanded by locums by 10-20 per cent, compared with 1995 rates. They are angered by "the controversial encouragement of some agencies to demand higher rates when clients were known to be desperate ..."

Several medium-sized pharmacies and large businesses are recruiting from overseas and applying for work permits. Their attention is focused on pharmacists in Commonwealth countries, who are likely to be more in demand in two years time. Now that graduate pharmacy courses in England and Wales have been extended to four years, about 300 new registrations will occur in 2000, compared with the recent average of 1,150.

Since Scottish universities already have a four-year course, the IPMI says pharmacists will launch an extra recruitment drive for pre-registration graduates and recently-registered pharmacists towards the end of 1999 and early 2000. "Will cheap flight tickets home for long weekends be the next incentive on offer to such recruits?"

The IPMI advises pharmacists to foster a reputation for working well with locums, which could increase their chances of securing them in future.

Another looming problem, given Labour's popularity in opinion polls, is its pledge to introduce an hourly minimum wage, which could be \$4.



Full-time and locum staff are increasingly hard to come by

Most of the survey's respondents say that, as their staffing levels have already been reduced to a bare minimum, the wage increase will have to be financed by their profits. Lower profits, in turn, will harm investment in the business and lower the pharmacy's goodwill value.

Some of the respondents say they will have to cut the number of hours their staff work to make ends meet.

Pharmacy wages fall 24 per cent short of the likely minimum wage, whereas those of most other retailers fall within 10 per cent, according to the IPMI. "As a result, the cost to most other retailers would cause less of an outcry and therefore the chances of community pharmacy's cry of anguish being heard over this issue is remote," it says.

Respondents, meanwhile, have mixed views about whether they should pay their staff extra for completing training courses. Just over half of the pharmacists say they will increase the wages of staff who receive the Royal Pharmaceutical Society's 'experienced medical counter assistant certificate'.

Out of these, half would give a one-off 'success' payment of \$50-\$100, while the remainder would increase the staff's wages by 5 per cent.

Only a few "enlightened" pharmacies offer additional holiday and time off each month to allow their staff to study for their courses. The IPMI says this training is vital "if these experienced staff are to play a full part in the advisory role now expected of pharmacy".

Most respondents pay their

dispensing staff around \$4-\$5 per hour, compared with the minimum rate of \$3.18. This is not surprising, says the IPMI, because dispensing technicians in hospital pharmacies are paid almost double that amount.

Few pharmacy businesses offer management training, or reward staff who attend such courses. Most respondents say it is a pharmacist's professional duty to attend further education courses, such as those run by the Centre for Pharmacy Postgraduate Education.

All the major multiples regularly analyse the productivity of their staff, but few of the small groups do, or indeed have any plans to do so. Only four pharmacies – out of those who had introduced changes arising from such studies – offer their managers and/or staff a share in the savings these changes are expected to make.

About half of respondents recorded the ratio of total staff costs to turnover last year. Most of the pharmacies' staffing costs seem too high to be supported by the rapidly falling National Health Service margin.

The IPMI urges all pharmacists to "devote resources now to studying and implementing staff productivity. Shop, stock room and dispensary layouts can benefit from work study examination and work scheduling", it says.

The IPMI questionnaire was sent to community pharmacy groups which have five or more branches. All the larger groups, such as Boots, most of the Co-operative groups, supermarket chains and Superdrug responded. Lloyds Chemists did not.

## ADVANCED INFORMATION

The NPA and the Contributions Agency are holding an SSP Road Show evening seminar on **April 17** in Reading. Details from Valda Elson at Mallinson House.

The **School of Pharmacy, University of London**, is organising a Health Services Research and Pharmacy Practice Conference on **April 17-18**, at the School of Pharmacy. Tel: 0171 753 5856.

The **British Association of Pharmaceutical Physicians** is holding an interactive workshop on **April 23-25**, at the Royal College of Pathologists, 2 Carlton House Terrace, London SW1. Contact the BrAPP secretariat on 0171 191 8610.

The **College of Pharmacy Practice** is holding a College Day Seminar on **April 24** at the De Montfort Hotel, Kenilworth, Warwickshire. 'GPs and pharmacists working together'. Annual address and annual general meeting. Tel: 01203 692 100.

**BIRA** is holding a joint meeting with the **Irish Medicines Board** on **April 29** at the Jury's Hotel, Dublin, on the subject of 'Regulatory focus on Ireland'. For further information contact Sue Stevens. Tel: 0171 538 9502.

The **Society of Cosmetic Scientists** is holding a regional lecture on **April 30** at the Cedar Court Hotel, Wakefield, Yorkshire 6.30 for 7.00pm. 'The changing face of male toiletries'.

**Industrial Pharmacists Group, RPSGB**, is holding a joint meeting with **Pharmaceutical Quality Group** on **May 1** at the Royal Pharmaceutical Society. Registration forms may be obtained from Dr J A Clements. Tel: 0171 735 9141.

**Sterling Events** is organising a conference and exhibition on General Practice '97 on **May 8-10**, at the National Exhibition Centre, Birmingham. Tel: 0151 709 8979.

The **UK Clinical Pharmacy Association** has arranged a residential symposium on **May 9-11**, in the Hinckley Island Hotel, Hinckley, Leicestershire. Tel: 0116 2776999.

**HR** is arranging a conference and workshop on **May 12-14**, at the Marble Arch Marriott, 134 George Street, London W1. 'Creating mutually beneficial partnerships with the NHS'. Tel: 0171 915 5055.

The **Guild of Hospital Pharmacists** is holding the Council & Committees day on **June 12**, London, and the Group Secretaries day on **June 13**, London. Tel: 0171 378 7255.

The **Fourth International Conference on Drug Absorption** will be held on **June 13-15**, in Edinburgh. Tel: 0131 300 3300.

**AESGP** is organising its annual Conference on **June 18-21** in Budapest. Contact AESGP, Brussels. Tel: +32 2 735 51 30.



## BTC restructures its organisation

Boots the Chemists has divided its corporate structure into four 'businesses' – healthcare, beauty, leisure and marketing – to make itself more focused.

Its structure used to comprise of five business centres, some of whose components would occasionally change. But BTC says it needed a change that would allow it to concentrate more on its customers' needs.

Peter Shotton, formerly business general manager of the company's healthcare business centre, is now director of healthcare businesses; Steve Hill, who was business general manager of the beauty and personal care centre, is director of beauty businesses; Stephan Murray, formerly business general manager of the photo and music centre, is director of leisure businesses.

Each director will be responsible for his division's strategy, product sourcing, and development, merchandising and supply. And each division is split into specialist areas, such as dental care, skin care and OTC healthcare, which have their own financial targets.

Richard Holmes, who was business general manager of the food and baby food centre, has been appointed as marketing director. He is responsible for developing and promoting BTC, and is supervising the company's marketing services, stores marketing, consumer public relations and customer service.

BTC will not appoint a merchandise and marketing director to replace David Kneale, who was recently appointed managing director of Boots' international retail development.

# NPA urges Government to ease 'burden' of EU Directive

The National Pharmaceutical Association has urged the Department of Trade and Industry to "minimise the extra burdens" community pharmacists face under the European Union's Working Time Directive.

The Directive sets out a maximum 48-hour week, minimum health and safety requirements during working time, provisions for minimum rest breaks and paid annual leave.

Both Conservative and Labour have pledged to make the Directive law after the general election.

When it is adopted, pharmacists will have to provide paid holiday leave to seasonal and casual staff. This will put financial pressure on small pharma-

cies, according to the NPA.

When this leave is combined with a 48-hour working week, adds the Association, pharmacies will become less efficient. Any redundancies that follow will clearly harm staff interests, it says, not promote them.

The NPA has proposed to the DTI that pharmacy employees should work continuously for at least 48 weeks before they are entitled to statutory paid leave.

Wherever possible, it says, the DTI should allow pharmacists to be exempt from the Directive, which should also be enforced equally in all EU countries.

● Customs & Excise will not allow pharmacies whose turnover exceeds \$1 million to use

VAT Scheme B – a simple way of preparing VAT returns.

C&E has resisted pressure from the NPA, which has asked it to allow pharmacists to exclude NHS dispensing from their total retail turnover. This would have enabled medium-sized outlets to remain within the \$1m limit.

Pharmacists can now choose between two schemes: B1 and F. B1 is designed for those who cannot separate takings at point of sale. Scheme F is for those who can.

Pharmacists who have difficulty with the new guidelines should contact their local VAT office, which will apparently agree to any method producing a "fair and reasonable result".

## Novartis Consumer Health loses marketing director

Jonathan Yardley has resigned as marketing director of Novartis Consumer Health UK, the company's OTC business, to become director of consumer products at Windsor Healthcare.

Mr Yardley will fill the vacancy left by Stephen Berrisford, who retired last month. He is due to take up his new post on May 1.

Mr Yardley has been marketing director of Novartis Consumer Health UK for five years.

Windsor, a subsidiary of Boehringer Ingelheim, says his experience will prove valuable.

"He also has an excellent understanding of consumer healthcare. All these qualities make him the ideal choice to handle our portfolio of products."

Patrick Foster, managing director of Novartis Consumer Health UK, says Mr Yardley's resignation was expected. "He and I had talked about it, I think he's ready for a general manager position ... I wish him well."

Mr Foster is currently interviewing applicants and expects to appoint a marketing director within three weeks.

## Glaxo fails to block generic 'Zantac'

Glaxo Wellcome has failed to prevent Novopharm from launching a generic version of Zantac in August, days after the drug's US patent expires.

The US Court of Appeals upheld a district court ruling that Novopharm could market its generic, whose core component is ranitidine hydrochloride.

GW had argued that there were two types of ranitidine hydrochloride – Forms 1 and 2 – and that it markets only Form 2, whose patent expires in 2002.

As Novopharm will launch a Form 1 ranitidine hydrochloride, the Court of Appeals ruled that it would not be infringing GW's patent for Form 2.

Zantac's sales last year fell 14 per cent to \$1.931 billion, although it remains GW's best-seller. However, it has admitted that generic competition could slash Zantac's US sales by 80 per cent.

## ABPI reports \$6,000m record export levels for UK drugs industry

Medicines worth a record \$6,000 million were exported by the UK pharmaceutical industry last year, according to the Association of the British Pharmaceutical Industry's annual review.

The ABPI, which represents 90 drug companies, says last year's exports were up 11 per cent on 1995. As imports grew 7 per cent only, the UK industry is set to create a record trade surplus of about \$2.5 billion.

Dr Trevor Jones, the ABPI's director general, says that, provided new restrictions are not imposed on its members, the industry is on track to become the UK's biggest money earner.

He adds that the NHS could help that forward momentum by adopting a more positive approach. "There is no place for

NHS schemes aimed at cutting the domestic medicines budget without any consideration of the longer-term health and economic costs, patients' well-being, or the consequences to future industry research," he says.

Pharmaceutical burdens included the "flawed and bureaucratic limited list scheme", and Prodigy, the computerised prescribing system for doctors that is on trial.

The ABPI's members, meanwhile, supply more than 90 per cent of the prescription medicines taken up by the NHS. The average per capita cost of this service is about \$80 a year, which is said to be far less than comparable countries, such as France, Germany and the US. Yet British customers spend, on average,

only 20p on prescription medicines every day, compared with 24p on newspapers, magazines and books, and 38p on tobacco.



Schoolboy James Bray helped the parliamentary under-secretary of state for science and technology, Ian Taylor, get to the bones of science at the Association of the British Pharmaceutical Industry's stand during Science, Engineering and Technology Week, March 14-21. "The aim of our stand was to show children and teachers that science can be fun," said the ABPI's education and training executive, Libby Steele. Colour brochures of the range of science support materials for schools is available free from the ABPI on 0171 930 3477 ext 1446



# Numark membership hits 1,000 mark

Numark recently signed up its 1,000th member and expects more community pharmacists to come on board because they fear the potential competition of Gehe/Lloyds Chemists.

Last year, Numark had 960 shareholding pharmacies, 15 more than in 1995. It says it now represents about 8 per cent of all UK pharmacies and 11 per cent of community pharmacies.

The news comes as Numark announced a 152 per cent hike in its pre-tax surplus to \$951,401 on a turnover of \$7,212,641 – up 31 per cent for the year to December 31. It allocated \$822,981 among its shareholders, more than twice as much as in 1995.

The highest rebate paid to a pharmacy shareholder was \$3,651 – up 191 per cent on the comparable figure in 1995. Nearly all shareholders, the company says, recovered their subscriptions. And this year they should recoup more than their subscriptions.

Numark says its own-label products were also successful. Its own-brand sales in January were up 15 per cent on those over the same month last year. This was a record, says the company, although there is still room for improvement.

Its monthly sales to each pharmacy average \$350-400. That figure, it says, could rise because it

plans to launch more products this year.

Last year, Numark and Smithkline Beecham jointly launched a management training programme. Numark says 100 pharmacies have so far registered to take part. A series of open evenings to present the programme will be held shortly.

Following the appointment of Norchem and Philip Harris Medical as Numark distributors last year, it now has 11 wholesaler partners with 23 UK depots.

Numark is holding its British Weekend at Blackpool on April 26/27, and an international conference in Nassau, Bahamas, October 12-18.

## Adams Healthcare is born

A management buy out team has set up a new company, called Adams Healthcare, that comprises the pharmaceutical Thackray surgical instrument and Thackray Practiceplus businesses of Depuy Healthcare – a division of Leeds-based Depuy International.

The team, led by Dr Rod Adams, Adams' managing director, paid \$9.5 million for the business. Granville Private Equity Managers and Bank of Scotland provided most of the money.

Adams Healthcare is based at Depuy's pharmaceutical plant in Garforth, Leeds, where it will produce a range of products that include generic dermatologicals, Aquagel lubricating jelly and Thackray surgical instruments.

# Healthcare sector judged to be 'poor on environmental care'

Healthcare companies have poor environmental records compared with other industrial sectors, according to a National Provident Institution survey.

NPI studied eight healthcare companies, including Smith & Nephew, Unichem, Seton Healthcare, ML Laboratories and Amer-sham International.

Smith & Nephew, it concluded, seemed to be the only company in the group "actively involved with environmental improvement".

S&N's initiatives include monitoring suppliers and helping customers to manage their own environmental performances.

The NPI study was part of a nationwide look at 100 leading

UK companies from 11 industries.

Each company was judged on its environmental management systems and reporting, environmental compliance and environmental products and innovation.

Other drug-related sectors in the survey produced more positive results. Boots and Kingfisher, which owns Superdrug, were considered 'Best in Class' in their retail group.

Boots was praised for tackling basic environmental issues affecting retailers and for having training seminars for its staff.

Scotia Holdings won NPI's approval among a group that also comprised Glaxo Wellcome, Zeneca, Smithkline Beecham, Medeva and British Biotechnology.

Scotia's research into developing drugs from plant extracts was considered praiseworthy.



Ashok Rishi, who owns four A K Rishi pharmacies, refuses to bow to trends. Grocers may be acquiring pharmacies around the country, but Mr Rishi recently bought a grocery next door to one of his outlets in New Milton, Hampshire, and doubled the pharmacy to 5,500sq ft. Following a £75,000 refit, the outlet, which is a member of AAH Pharmaceuticals' Vantage scheme, now has a beauty salon with a Clarins treatment room and a full-time beauty therapist

## COMING EVENTS

### MONDAY, APRIL 14

**Leicestershire Branch, RPSGB**  
Burleigh Court Conference Centre, Loughborough, 8.00pm. CPPE workshop, 'Medicines management – cardiovascular'.

**Bromley Branch, RPSGB**  
AGM at Frogal Centre (Post-Graduate Education Centre), Queen Mary's Hospital, Frogal Lane, Sidcup, Kent, 7.00 for 8.00pm.

**North Metropolitan Branch, RPSGB**  
School of Pharmacy, Brunswick Square, London WC1, 8.00pm. 'Pharmaceutical antiques and

memorabilia' by D T Turner. Welsh School of Pharmacy.

### TUESDAY, APRIL 15

**Fife Branch, RPSGB**  
Dunniker House Hotel, Kirkcaldy, 7.45pm. AGM and 'Chinese medicine'.

### THURSDAY, APRIL 17

**Bedfordshire Branch, RPSGB**  
Cedar Room of the Conference Centre, Silsoe College, Silsoe, 8.00pm. AGM followed by training video.

**Slough Branch, RPSGB**  
AGM at the Zeneca Agrochemicals, Jealotts Hill Research Station, 8.00pm.

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# ABOUT people

## For richer for poorer

Barrie Haigh is the richest pharmacist in the UK, worth \$275 million, according to the *Sunday Times* Rich List 1997.

This puts him equal 58th among Britain's wealthiest people. He is now to the top 500 following the sale of his pharmaceuticals consultancy, Innovex, last October.

In at 68 is Tony Tabatzuk and family, with an estimated \$260m. Their wealth is associated with Amerpharm and Generics (UK).

Dr Philip and Patricia Brown of PJB Publications are 209th, with \$90m. Holdings in Scotia Pharmaceuticals put David Horrobin and his family in an equal position.

Further down comes Allen Lloyd and family at 266th, with an estimated \$70m. This is a leap from last year's \$40m, and follows the purchase of Lloyds Chemists by Gehe earlier this year.

In Ireland, Don Panoz, founder of the Elan pharmaceuticals company, is ranked 11th wealthiest there, with a fortune of \$130m.

Across Europe, Paul Sacher and the Hoffman family are considered the richest, with a fortune estimated at \$8.18 billion (this puts them sixth in the world rankings). At equal ninth is the Merck family, worth \$3.12bn. The Boehringers are 16th, with \$2.56bn.

## First pharmacist to obtain CPP Membership by Practice

Pharmacist Michael Line, from the Kilnbridge Pharmacy in Woking, is the first person to obtain Membership by Practice to the College of Pharmacy Practice.

To achieve this he had to complete a portfolio and make a submission to the CPP outlining how he had met the college's criteria.

This included demonstrating professional growth and commitment, participating in continuing professional development and showing an analytical and evaluative approach to practice.

"The best thing about the 'by practice' scheme is that there is no examination. However, it is hard work assembling the evidence showing that the criteria have been met," says Mr Line.

He had to attend an interview with two CPP members and the College's membership committee following his submission.

Mr Line has a wide experience of community pharmacy having held positions as a branch manager and executive pharmacist for various multiples, such as



CPP member Michael Line

Moss, Kingswood, Underwoods and Boots.

He has been involved in CPD throughout his career. He has developed a residential homes care assistants course and has also participated in the Haslemere Healthy Heart scheme.

The National Asthma Campaign has invited Mr Line to organise a workshop for it following his successful membership application.

## The mystery history of a pharmacy

Staff at a branch of Paydens Chemists, Clarke & Colemans in Tonbridge, Kent, have found a novel way of promoting their shop to customers, but they do not know who to thank for it.

"A man in his late 20s came in one day and offered to find out the pharmacy's history," says pharmacist Matthew Slevin.

The amateur historian produced an article on the pharmacy's history dating from the latter half of the 18th century. It contains details of the proprietors through the ages, the young partners who went on to become owners and the various sidelines they ran, which included distributing stamps and acting as an insurance agent for the Royal Fire & Life insurance company.

The mysterious benefactor has included old photographs of the premises and photographs of antique bottle labels, but the staff do not know who he is or why he wrote the article.

Customers, however, have been impressed with it and have given it the thumbs up. "They think that it is marvellous," says Mr Slevin.

## APPOINTMENTS

**Veronica Wray** has been appointed the new head of public affairs at the National Pharmaceutical Association. She replaces **Colette McCreedy**, who has taken up her new post as the NPA's head of practice. Ms Wray spent five years as director of PR and

advertising at the British Diabetic Association. She moved from PR into training and has spent the past 18 months helping others develop their PR skills. **Tony Williams**, **Pravinchandra Shah** and **Sailesh Dawda** have been appointed as NPA branch secretaries for the Isle of Wight, Slough, and South West Essex respectively.

Mawdsley-Brooks & Co has made **Robert Harwood** its commercial director. Mr Harwood was previously northern regional general manager for Chubb and European sales manager for Hertz International. **Julie O'Hara** and **Steve Howes** have joined the business development management team and will manage accounts at the Salford and West Bromwich depots respectively.

**Rob Holder** has become Scholl's footwear and hosiery marketing manager. **Andrea Nichols** has joined the

company as footwear and direct mail product manager and **John Saunders** has been appointed footwear sales manager.

**P Hawkins** (Whitehall Laboratories) and **G Ford** (Pfizer Consumer Healthcare) have been elected to the council of the

Proprietary Articles Trade Association. They will represent the manufacturers' section. **M Guthrie** (Graham Tatford & Co) and **R Short** (Philip Harris Medical) will continue in the wholesale section and **J Thomas** and **G Bullous** in the retail section.



Mawdsley-Brookes' new commercial director, Robert Harwood, with business development managers Julie O'Hara and Steve Howes



There was champagne, courtesy of C&D and Whitehall Laboratories, at P A Rooney Pharmacy in Pinner last week. Whitehall's Margaret Stacey (left) presented Jean Gale, winner of the monthly draw for assistants completing the Counterpart Assistants Training programme, and her supervising pharmacist, Douglas Bently, with their bubbly

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In Association with MTI Ltd*

Miller Freeman, publishers of the leading pharmacy magazine *Chemist and Druggist*, is to publish the definitive report on the UK over-the-counter pharmaceuticals market - *The Chemist & Druggist OTC Healthcare Report '97*. This detailed 350 page report, which has been produced in conjunction with the leading healthcare market research company *Market Tracking International*, contains both a comprehensive analysis of the developments currently influencing the total market and a series of individual studies of the main OTC categories.

OTC medicines represent an increasingly attractive market as the pharmaceutical industry faces challenges in its main ethical drugs business from cost controls amongst health authorities right across Europe. Growth in private expenditure on OTC medicines fits well with government initiatives to reduce pressures on the NHS drugs bill, while the scope of the OTC market has been widened by switches from Prescription Only Medicine Status to P (pharmacy only status), or from P to General Sales List status, for an increasing number of drug products. At the same time, with resale price maintenance in OTC medicines currently under direct pressure from some of the UK's powerful grocery multiples, and with the pharmacy trade about to see further consolidation in the imminent sale of Lloyds Chemists, this report appears at a particularly appropriate time for the dynamic OTC healthcare market.

## Market Intelligence from the Forefront of the OTC Healthcare Industry

Miller Freeman is the largest and most important source of news and information on the OTC healthcare market and pharmacy retailing in the UK. Market Tracking International is one of the leading market research organisations in the healthcare field, and has previously worked with Miller Freeman on the *UK OTC Healthcare Report 1994/1995*, *European Healthcare Markets 1996*, and the *Miller Freeman Pharmacy Surveys 1994* and *1995*.

## Key features of the report

- Analysis of total market size and trends
- OTC medicines and the NHS drugs bill
- Impact of POM to P switching
- Resale Price Maintenance Issues
- Detailed price trends by category
- Profiles of 28 product sectors, including retail sales trends, market segments, advertising, brand leaders and future prospects.
- Profiles of 25 major companies, including acquisition and merger strategies
- The role of drugstores and grocery multiples
- European OTC Pharmaceutical Retailing Patterns
- Market forecasts - the total OTC medicines market and individual product sectors 1997-2000

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#### Market Overview

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Cough treatments; Cold treatments and decongestants; Sore throat remedies; Oral analgesics; Vitamins, minerals and food supplements; Medicated skincare; Indigestion remedies; Oral hygiene; Laxatives and anti-diarrhoeals; Smoking cessation products; Hayfever remedies; Topical analgesics; Stomach upset and travel sickness remedies; Eye care; Sleeping and calming products; Haemorrhoid treatments; Gynaecological products; Ear care; Cystitis treatments; Worm



treatments; Pregnancy testing; Footcare; Natural medicines; Contraceptives; Sanitary protection; Baby products; Depilatories.

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#### The Future Outlook for OTC Healthcare

*350 pages packed with up-to-date analysis of the major issues influencing the future of OTC healthcare in the UK, plus extensive market information and data on all the main product categories, makes this THE most comprehensive and cost-effective market research report available on the OTC Healthcare sector today.*

## THE CHEMIST & DRUGGIST OTC HEALTHCARE REPORT 1997 PRICE \$475

Yes, please send me \_\_\_\_ copy/ies of the Chemist & Druggist OTC Healthcare Report 1997 at \$475 (discounts available for multiple orders).

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A black and white photograph of a worker in a warehouse, wearing a hard hat and a light-colored shirt, pushing a large metal coil. The background is filled with many more large metal coils stacked vertically, creating a strong sense of depth and industrial scale.

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